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PENISTONE  
RURAL DISTRICT COUNCIL



ANNUAL REPORT

of the

Medical Officer of Health

for the Year

1955



PENISTONE RURAL DISTRICT COUNCIL

PUBLIC HEALTH COMMITTEE 1955

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"	F. WINTERBOTTOM (C.C) (Chairman of the Council)

STAFF OF THE HEALTH DEPARTMENT

Medical Officer of Health

J. MAIN RUSSELL, M.B., Ch.B. (Edin)., B.Hy., D.P.H.

Senior Assistant Medical Officer

J.J. SMITH, M.B., Ch.B., D.P.H.

Sanitary Inspector and Surveyor

L.J. PEARSON, M.R.San.I., M.S.I.A.



PENISTONE RURAL DISTRICT COUNCIL.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
FOR THE YEAR 1955.

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To the Chairman and Members of the Penistone Rural District Council.

Lady and Gentlemen,

I have the honour to submit my Annual Report upon the Health Services of the Penistone Rural District for the year ended 31st December, 1955. The report, as in recent previous years, is prepared according to an accepted pattern and contains the relevant statistics. There is no emphasis placed on any one subject, or group of subjects in this report as the Minister has not specifically asked for anything in particular this year. I have again included, of course, some statistical detail, with short comment, on the services provided by the Local Health Authority, indicating the extent to which those services are used within the district.

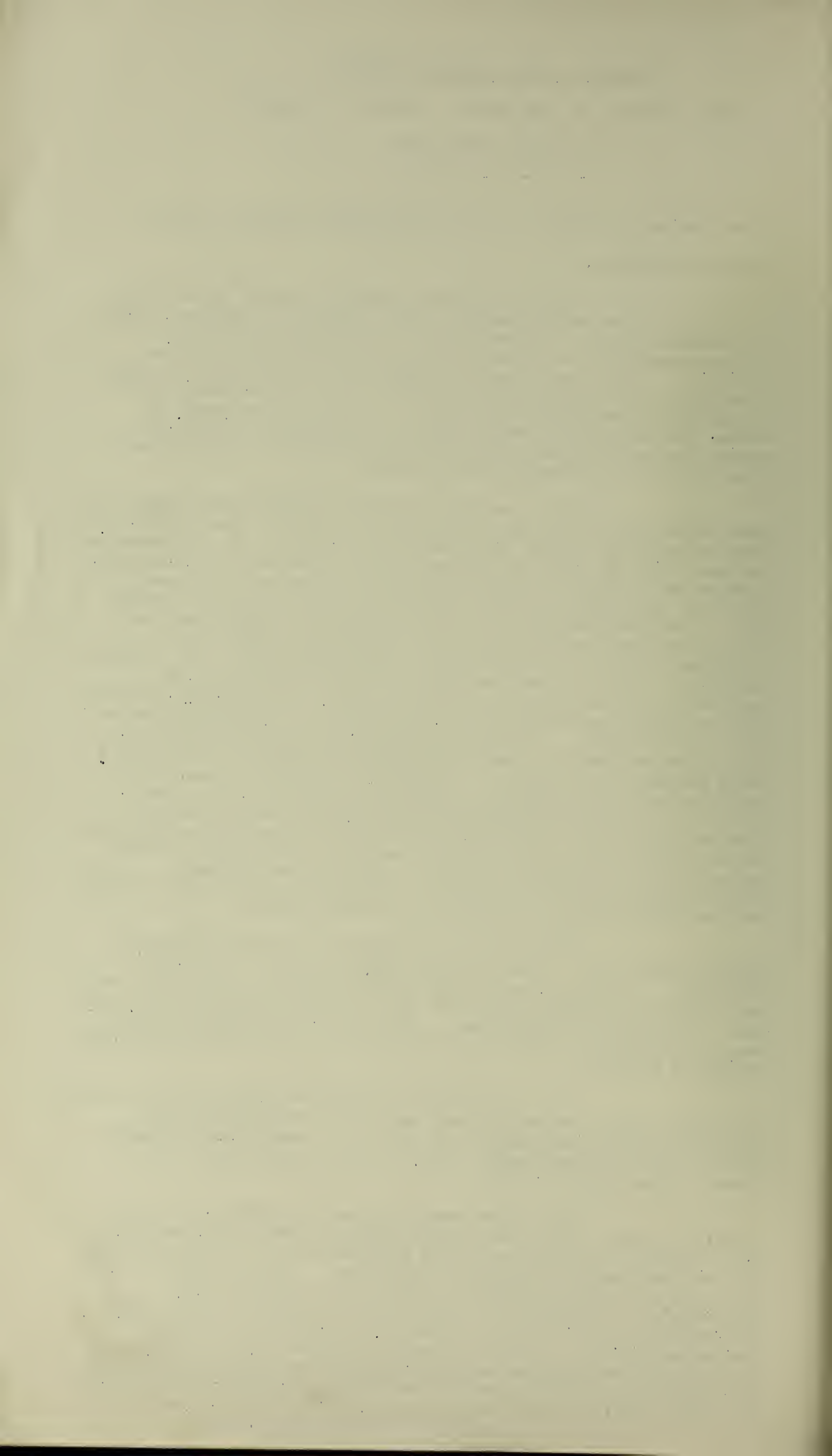
We can see from the Vital Statistics tables that the Crude Birth Rate for the district, at 15.6 per 1,000 of the population, has increased slightly compared with last year's figure. It also compares favourably with the rates for England and Wales and for the Administrative County of West Riding. On application of the comparability factor, however we find that the corrected Birth Rate for the district becomes 17.0. The Death Rate for the district increased slightly over last year's figure and the Crude Death Rate, at 12.2 per 1,000 of the population, compares unfavourably with that for the rest of the Country generally. The corrected Death Rate, after application of the comparability factor, gives us a figure of 12.9. The Still-birth Rate, which in 1954 was particularly high, has fallen to a certain degree but it is still too high. At 33.9 per 1,000 live and still births it is very much higher than the figure for England and Wales and for the West Riding Administrative County. Four still births are too many in a population the size of that of the Penistone Rural District. One is at a loss to make any suggestion as to the cause of this continued relatively high still birth rate, but one would be inclined to emphasise how important it is that the expectant Mother is given every possible medical advice to carry her through to successful confinement. Doctors, Health Visitors and Midwives are all available to advise on the problems that might arise during this Ante-Natal period.

The Infantile Death Rate has increased very much compared with 1954. This is a very unhappy feature of the Vital Statistics. Certainly, we are not dealing with large numbers, but there were 5 infantile deaths in Penistone Rural District during the year, and that is a sad picture altogether. This Infantile Mortality Rate has been increasing for a year or two, but I have no record of it ever being so high as in 1955.

Of the total number of deaths attributed to the district for the year under review, over 50% were caused by diseases of the circulatory system, including heart disease. Deaths from malignant disease formed the next largest group, and that number approximated closely to the figure for 1954.

An unhappy feature of the Death Statistics is the relatively large number of accidental deaths. During the year there were 5 deaths due to accidents, 4 of which occurred in the home and one on a slippery footpath during the icy weather. All 5 cases were well up in years and each one died as a result of an accidental fall. The problem of accidents is one about which we should concern ourselves. The prevention of accidents is, after all, one important aspect of preventive medicine. We hear a great deal about road accidents, but less seems to be said about accidents in the home. In a recent report of the standing Inter-departmental Committee on Accidents in the Home it was stated that since 1943 until the early 1950's well over 1,000 more





fatal casualties occurred each year in the home than on the roads. The majority of victims of home accidents are young children and old people and it is said that over 72% of those accidents occur in people over 65 and 12% in young children. Of those; 63% are due to falls. In your district in 1955 we had a ratio of 4 accidents in the home to 1 on the road (if you can call an elderly person slipping on an icy footpath a road accident). Since we are getting a higher proportion of aged persons in the population as the years pass, and with all the modern scientific home furnishings (and their possibilities of danger if in any way defective) it behoves us all to do what we can to eliminate dangers in the home and make life for the elderly people and the young people safer. It might be superfluous for me to mention the common dangers one does find in a home, e.g. fire, falling downstairs, tripping over carpets, children's toys, awkward gas taps and electric switches. There are countless traps for the old and the young. Could we not campaign for more attention to these dangers and try to cut down on the number of deaths from accidents in the home which amount to, on an average throughout the Country, 24 every day? It is reported that approximately 15 persons die as a result of road accidents in a day, but there are also anything from 18 to 19 who die as a result of accidents in the HOME.

Looking at the Infectious Diseases statistics we find that there was an overall increase in the number of Infectious Diseases during the year, due to a sharp outbreak of Measles. The total number of cases notified was 93. The cases appeared in all parts of the district and occurred principally in the first half of the year, 38 being notified during the first quarter, 54 in the second quarter, and the remaining 1 in the third quarter.

Mr. L.J. Pearson, my Chief Sanitary Inspector, in the preface to his report dealing with Sanitary Circumstances, states;

"There have been no additions or alterations to my staff, so that specialization of any one subject is not possible.

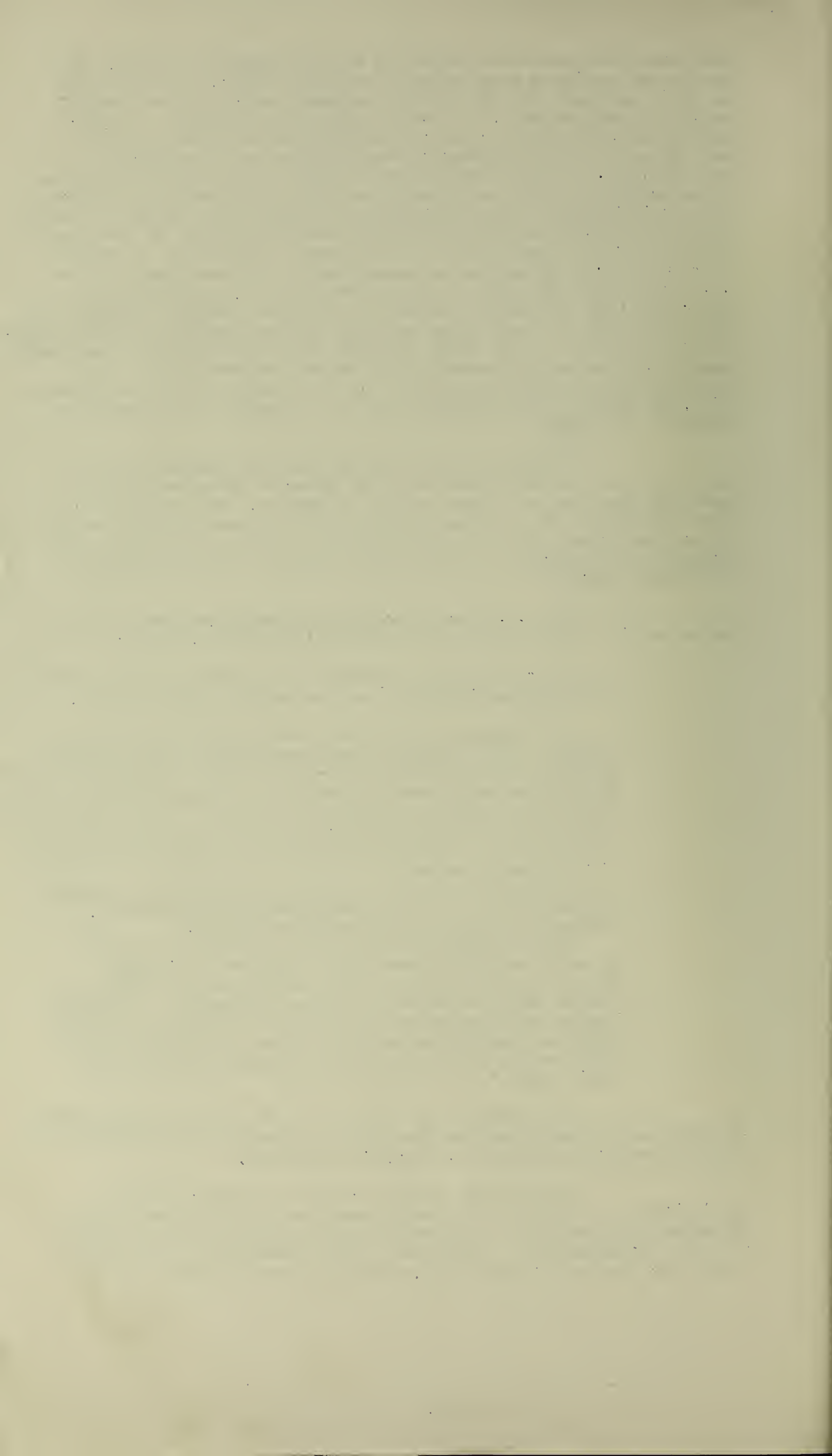
The Highlights of the year under review have been as follows:- The closing of Stainborough Folds Hostel and the rehousing of the families once residing there. The commencement of three new major sewerage schemes. The aggravating difficulties encountered during the drought. The formation of a mobile team to maintain and repair the Council properties and the scheme for installing seventy-eight new cooking ranges in pre-war Council houses.

I think you can also note with satisfaction the generous attitude of the Council to improvement grant applicants, especially for such a small authority as ours.

You will gather that it is not possible for one man to carry out all the above works alone and credit must go to my staff for their loyalty during the year under review, which I feel must be unique in progress. I cannot imagine again having the personal satisfaction of commencing three new sewerage schemes in one year, in addition to the usual routine duties which befall officials holding dual appointments."

I feel that it is only fair to Mr. Pearson to report this in this document and I also feel that you, as a Council, must be pleased to note the progressive work of Mr. Pearson's Department.

I would like to put on record my grateful thanks to the Chairman and members of the Health Committee for their encouragement throughout the year and to the Clerk and other officials of the Council for their co-operation. I would also like to mention here how grateful I am to Mr. Pearson for his loyal support and devotion to the work of





the Department throughout the year.

My grateful thanks are also due to my colleague,  
Dr.J.J.Smith, who has been a great help throughout the year.

I am.

Your obedient servant,

J. MAIN RUSSELL

Medical Officer of Health.



## DISTRICT STATISTICS IN BRIEF

1955

The Penistone Rural District covers an area of 29,003 acres. The District is divided into 10 Parishes. The approximate acreage and the number of houses in each Parish is as follows:-

<u>PARISH</u>	<u>ACREAGE</u>	<u>NUMBER OF HOUSES.</u>
Cawthorne	3,709	340
Dunford	8,953	275
Gunthwaite & Ingbirchworth	2,057	109
High Hoyland	851	54
Hunshelf	1,816	99
Langsett	4,914	78
Oxspring	1,202	241
Silkstone	1,559	543
Stainborough	1,720	131
Thurgoland	2,222	534
	<hr/>	<hr/>
	29,003	2,404
	<hr/>	<hr/>

The Rateable Value of the District is £77,874, while the Product of a Penny Rate is estimated to be £263 as at 1st April, 1956.

### VITAL STATISTICS.

#### POPULATION.

The Registrar General has given his estimation of the population at the mid-year as 7,320. This is a decrease of 10 compared with that for 1954.

BIRTHS. There were 114 live births attributed to the district during 1955. Of these 60 were males and 54 females. This was 9 more than 1954. There were 5 illegitimate births, 1 male and 4 female.

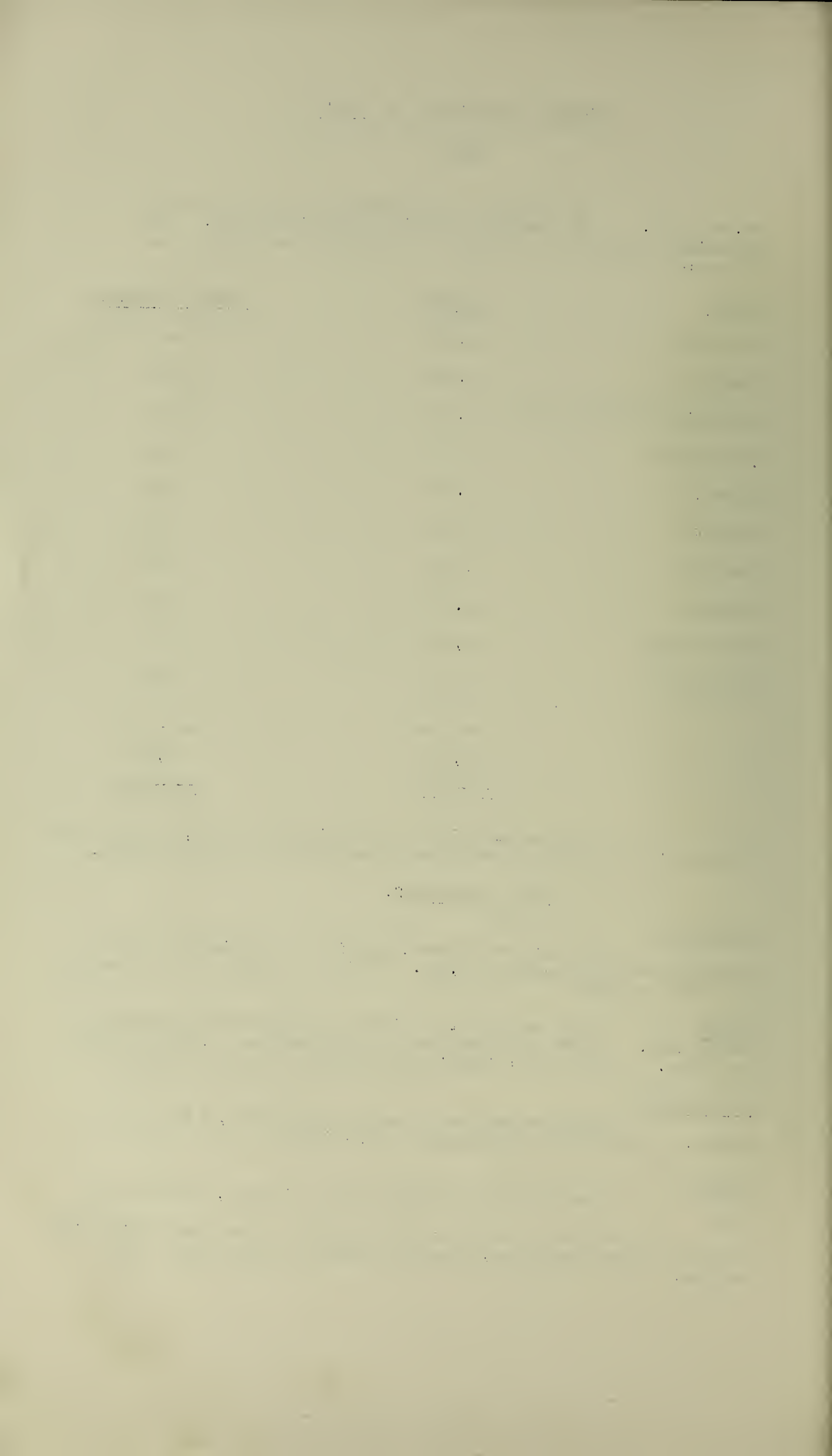
#### STILL BIRTHS

During the year there were 4 still-births, 2 male and 2 female. There were no illegitimate still-births.

#### DEATHS.

89 deaths were attributed to the district, 6 more than in 1954

Set out overleaf are tables of Live Birth Rates, Still Birth Rates and Crude Death Rates, with those rates for other parts of the Country.





RATES PER 1,000 TOTAL POPULATION.

YEAR	ENGLAND & WALES	WEST RIDING ADMINISTRATIVE COUNTY	PENISTONE R.D.
LIVE BIRTHS			
(Rates per 1,000 of the Population)			
1955	15.0	15.3	15.6
1954	15.2	15.1	14.3
1953	15.5	15.7	13.21
1952	15.3	15.4	12.90
1951	15.5	15.8	15.1
DEATHS (Crude Death Rate)			
(Rates per 1,000 of the Population)			
1955	11.7	11.7	12.2
1954	11.3	11.9	11.3
1953	11.4	11.6	10.16
1952	11.3	11.5	9.7
1951	12.5	12.7	9.8
STILL BIRTHS.			
(Rates per 1,000 Live and Still-births)			
1955	23.1	26.4	33.9
1954	23.4	25.9	45.5



PRINCIPAL CAUSE OF DEATH

<u>INFECTIVE and PARASITIC DISEASES</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Tuberculosis respiratory	2	-	2
<u>MALIGNANT NEOPLASM</u>			
Stomach	-	3	3
Lung	1	-	1
Breast	-	3	3
Uterus	-	-	-
Other Sites	6	1	7
<u>NERVOUS SYSTEM</u>			
Vascular Lesions of nervous system	4	8	12
<u>CIRCULATORY SYSTEM</u>			
Coronary Disease	8	4	12
Other Heart Disease	14	11	25
Other Circulatory Diseases	5	3	8
<u>RESPIRATORY SYSTEM</u>			
Pneumonia	3	-	3
<u>DIGESTIVE SYSTEM</u>			
Ulcer of Stomach and Duodenum	1	-	1
<u>GENITO-URINARY SYSTEM</u>			
Hyperplasia of prostate	1	-	1
<u>INFANT DEATHS</u>			
Congenital Malformations.	1	-	1
<u>ACCIDENTS and VIOLENCE.</u>			
All other accidents.	1	4	5
<u>OTHER DEFINED and ILL- DEFINED DISEASES</u>	1	4	5
	48	41	89





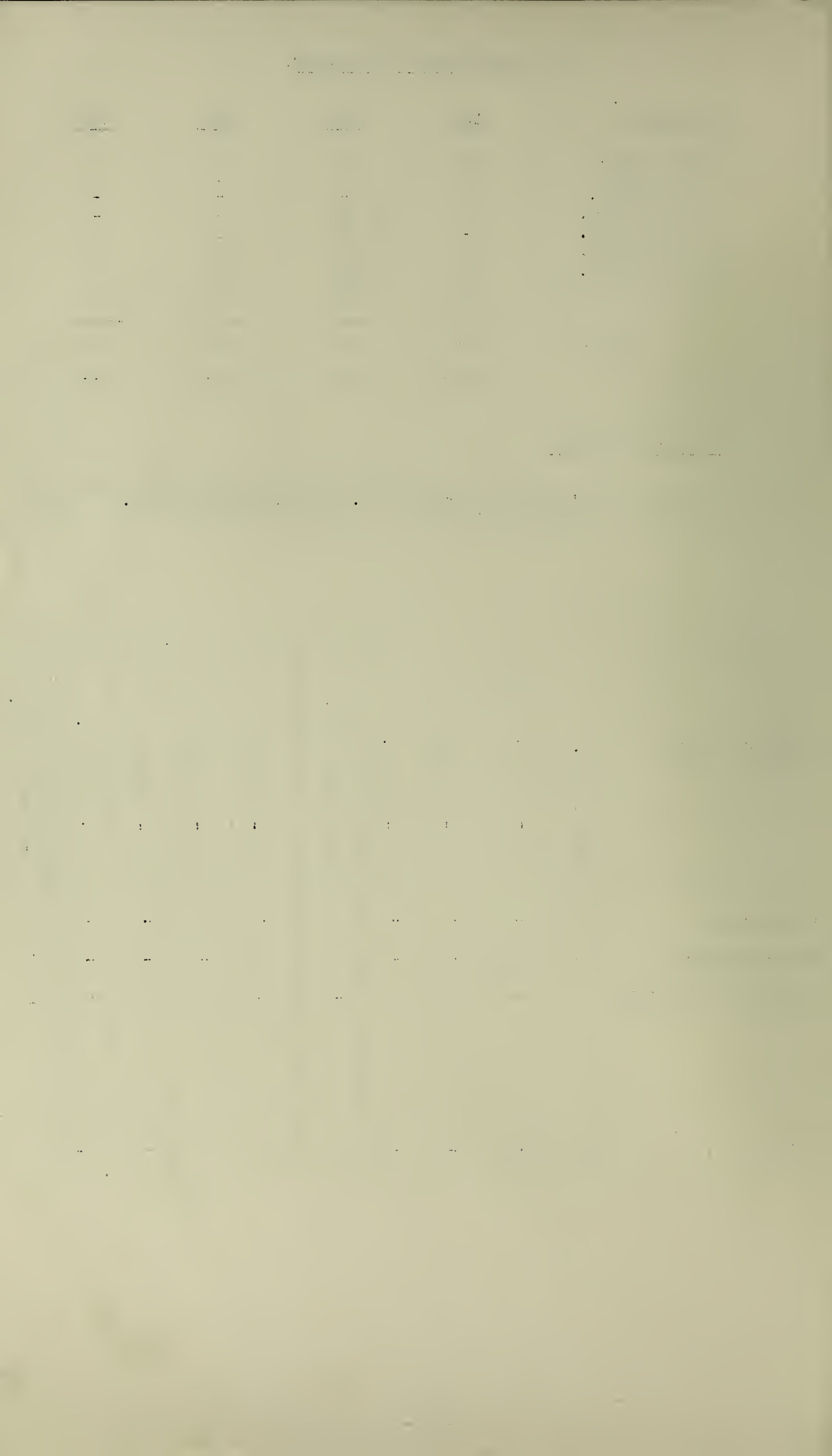
# AGE DISTRIBUTION OF DEATHS.

<u>AGE GROUP</u>	<u>1952</u>	<u>1953</u>	<u>1954</u>	<u>1955</u>
Under 1 year.	2	2	3	5
1 to 2 years.	1	1	1	1
2 to 5 years.	1	-	-	-
5 to 15 years.	-	1	-	-
15 to 25 years.	-	3	1	1
25 to 45 years.	7	4	3	3
45 to 65 years.	24	19	27	18
65 years and over.	46	50	48	61
	<hr/>	<hr/>	<hr/>	<hr/>
TOTALS:	81	80	83	89
	<hr/>	<hr/>	<hr/>	<hr/>

## INFANTILE MORTALITY

There were 5 Infantile Deaths during 1955 (2 male and 3 female,) equivalent to a rate of 43.9 per 1,000 live births. I give below table showing Age Distribution of Infantile Deaths.

CAUSE OF DEATH	Under 1 week.	1 - 2 weeks.	2 - 3 weeks	3 - 4 weeks.	Total under 4 wks.	1 - 3 months.	3 - 6 months.	6 - 9 months.	9 - 12 months.	Total under 1 year.
Prematurity	3	-	-	-	3	-	-	-	-	3
Broncho Pneumonia	-	-	-	-	-	1	-	-	-	1
Capillary Bronchitis	-	-	-	-	-	-	1	-	-	1
TOTALS:	3	-	-	-	3	1	1	-	-	5



# DEATHS UNDER ONE YEAR

Rate per 1,000 Live Births.

Year	England and Wales	West Riding Administrative County	Penistone R.D.
1955	24.9	26.2	43.9
1954	25.5	28.0	28.6
1953	26.8	29.3	19.2
1952	27.6	30.0	18.5
1951	29.6	31.8	25.6

## MATERNAL MORTALITY

There were no maternal deaths during 1955.

## INQUESTS.

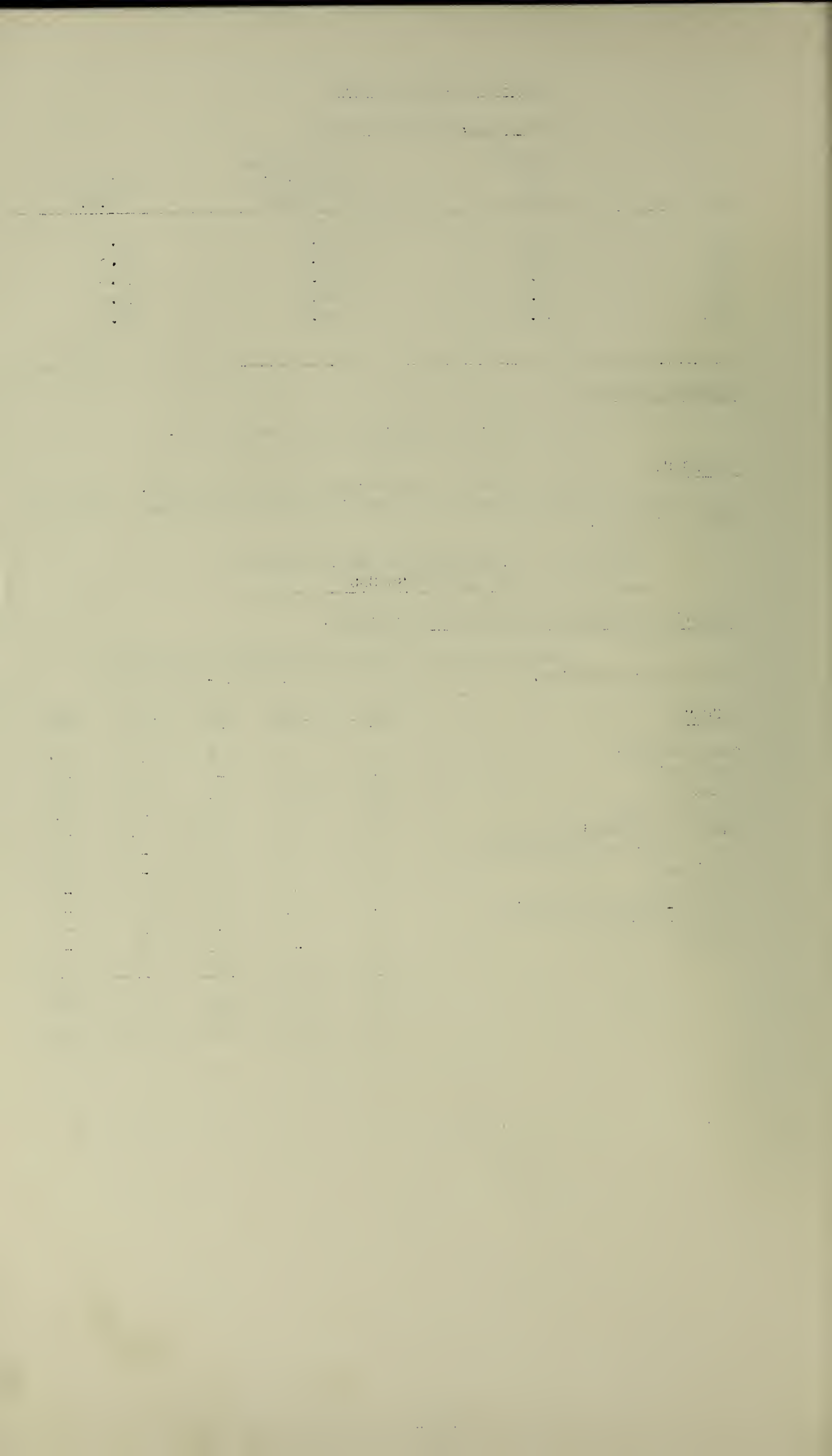
Nine Coroners' Inquests were held during 1955. In eight cases the cause of death was certified after Post Mortem Examination without inquest.

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

### Infectious Diseases other than Tuberculosis.

During the year a total of 101 cases of Infectious Disease were notified. The following tables are self-explanatory.

<u>DISEASE</u>	<u>1951</u>	<u>1952</u>	<u>1953</u>	<u>1954</u>	<u>1955</u>
Scarlet Fever	9	8	5	13	3
Diphtheria	-	1	-	-	-
Measles	118	208	91	4	93
Whooping Cough	18	6	13	-	1
Pneumonia (Notifiable)	4	6	5	2	-
Acute Anterior Poliomyelitis	2	2	1	-	4
Erysipelas	1	1	1	-	-
Dysentery	5	-	4	-	-
Cerebro-Spinal Meningitis	-	1	-	1	-
Food Poisoning	-	41	-	13	-
Malaria	-	-	1	-	-
	<u>157</u>	<u>274</u>	<u>121</u>	<u>33</u>	<u>101</u>

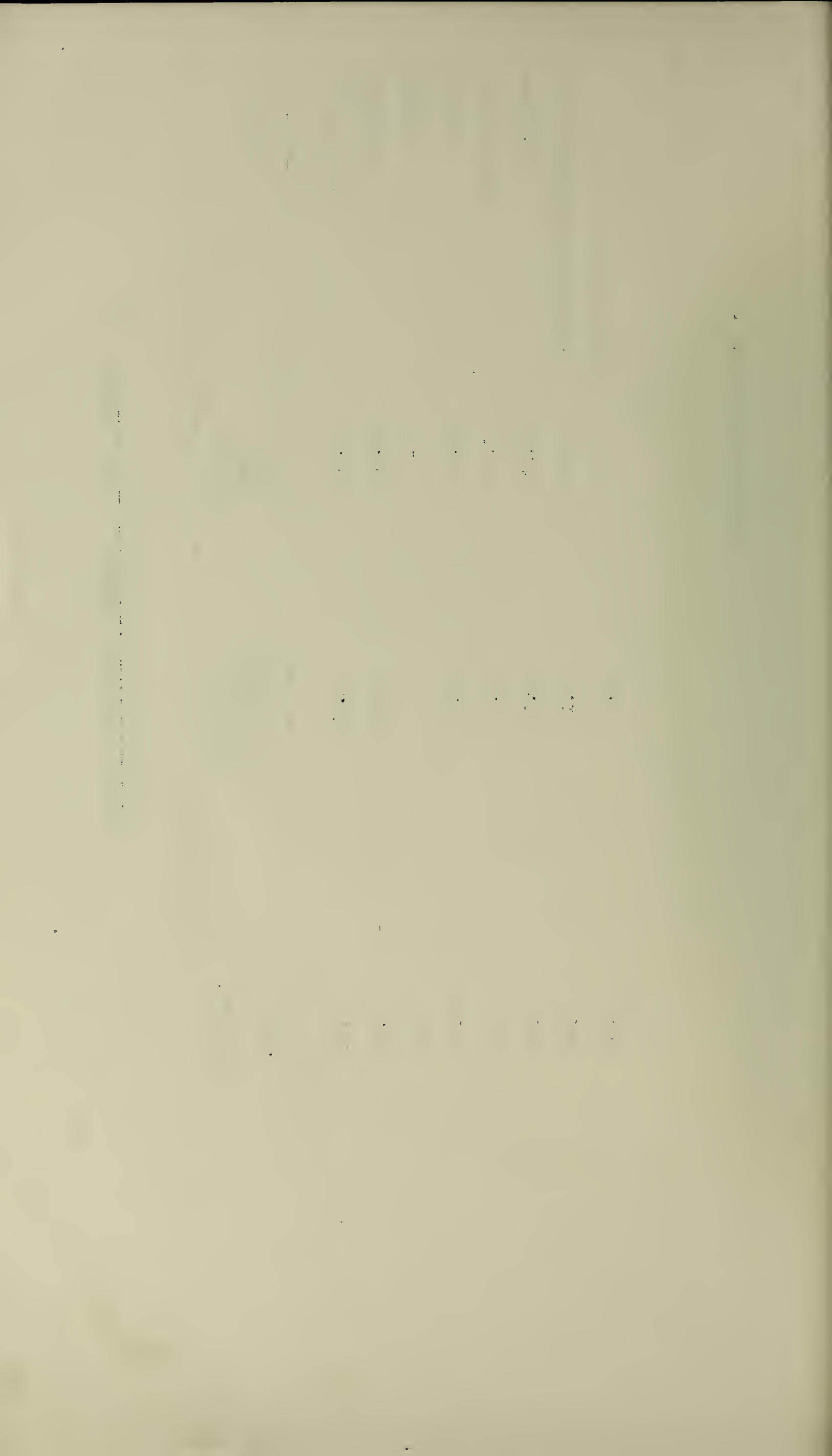




ATTACK RATE OF COMMONER INFECTIOUS DISEASES

DISEASE	ENGLAND and WALES	WEST RIDING ADMINISTRATIVE COUNTY	PENISTONE  R.D.
Scarlet Fever	0.73	1.01	0.41
Diphtheria	0.00	0.00	0.00
Pneumonia	∞	∞	0.00
Measles	15.61	18.23	12.70
Whooping Cough	1.78	1.93	0.13
Erysipelas	0.10	0.16	0.00
Acute Poliomyelitis (Paralytic)	0.08	0.15	0.41
(Non Paralytic)	0.06	0.05	0.13

∞ Figures not available



AGE DISTRIBUTION OF INFECTIOUS DISEASES

DISEASE	AGE GROUP										TOTALS		
	0 - 1 yr.	1 - 2 yrs	2 - 3 yrs	3 - 4 yrs	4 - 5 yrs	5 - 10 yrs	10 - 15 yrs	15 - 25 yrs	25 - 35 yrs	35 - 45 yrs	45 - 65 yrs	65 yrs & over	
Measles	2	8	11	5	19	46	1	-	1	-	-	-	93
Scarlet Fever						2			1				3
Whooping Cough			1										1
Acute Pneumonia													-
Dysentery													-
Food Poisoning													-
Erysipelas													-
Puerperal Pyrexia													-
Acute (Para) Poliomyelitis (Non-Para)					1	1	1	1					3 1
TOTALS :	2	8	12	5	20	49	2	1	2	-	-	-	101





### SCARLET FEVER.

During the year there were only 3 cases of Scarlet Fever in the district, the attack rate being 0.41 compared with the figure of 0.73 for England and Wales and 1.01 for the West Riding Administrative County.

Of these 3 cases 1 occurred during the second quarter of the year and was notified from Cawthorne. The remaining 2 occurred during the last quarter and were notified from Thurgoland and Birds Edge,

### DIPHTHERIA.

There was no case of Diphtheria notified in the district during 1955. The latest returns from the Ministry of Health state that the provisional figure of notifications of the disease for England and Wales received during 1955 was 161, compared with 173 in 1954. The total number of deaths was 11, as against 9 in 1954.

The immunisation of all children before they reach the age of 1 year is of vital importance if we are to prevent a recurrence of this disease in the district once more. I must appeal therefore to parents to make sure that their children are immunised, and thus protected against Diphtheria, before their first birthday. To those parents whose children are now over the age of 1-year and have not yet been immunised I say "Get them protected now- prevention is still better than cure".

During the year under review 41 children under the age of 5 years and 19 between the ages of 5 and 15 years received initial protection against Diphtheria by immunisation and in addition 53 children received a reinforcing dose of the protective antigen on commencing School.

### MEASLES.

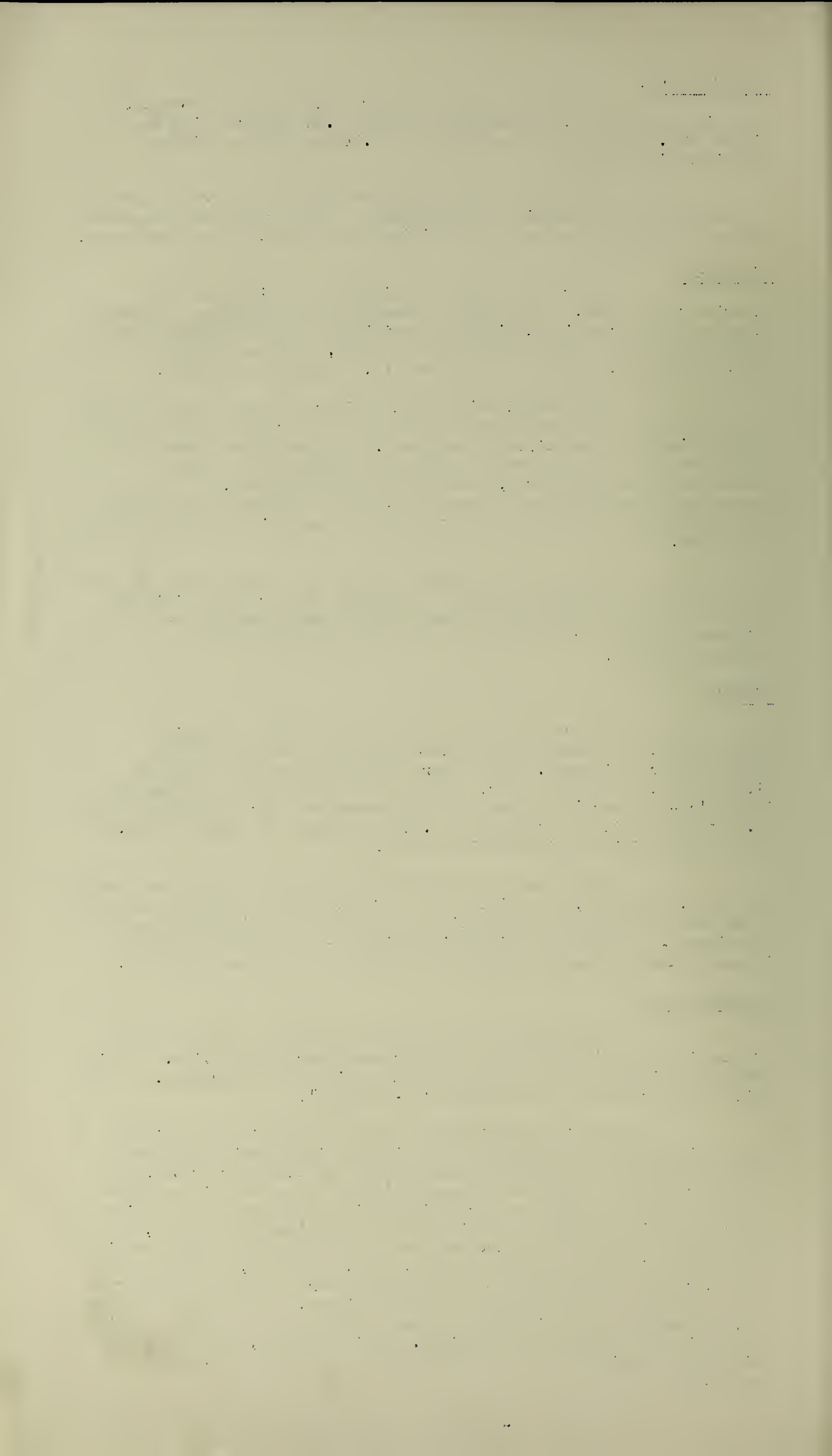
In recent years we have experienced a relatively high incidence of Measles, and in 1955 there were 93 cases in the Penistone Rural District. This sharp outbreak occurred during the first two quarters of the year, the children principally affected being in the "5 - 10 years" age group. The attack rate for the district was 12.70 compared with the figure of 15.61 for England and Wales and 18.23 for the West Riding Administrative County.

The possible after effects of Measles can be very serious and it is, therefore, essential that the family Doctor should be called in if parents have any reason to believe that their child is suffering from the disease. Measles is highly infectious and the patient should be isolated until the Doctor says that the child is free from infection.

### WHOOPIING COUGH

It is pleasing to note that there was only one case of Whooping Cough in the district during the year under review. This occurred during the first quarter and was notified from Oxspring. The child affected was in the age group "2 - 3 years".

One would like to think that this lowering in the incidence of Whooping Cough has something to do with the immunisation against the disease which has been fairly popular during the last year or two. It is rather early to arrive at any conclusion so far as this is concerned I still think that there are more children in the Penistone Rural District who could avail themselves of this protection against the disease, and I base this opinion on the fact that only 7 young children were immunised against Whooping Cough during the year. This, of course, is the number of children who received the protection under our Local Health Authority scheme and may not necessarily be an exact figure. Quite a large number of young babies are now immunised by the family Doctor using the combined Diphtheria and Whooping Cough antigen. It is possible, therefore, for a child to be vaccinated against Whooping Cough and we are not aware of that fact.





We try to keep a check as far as possible but it is sometimes difficult. Be that as it may, I still think that not all the children who might have this protection take advantage of this service which is freely available.

#### TUBERCULOSIS

During the year 4 cases of Tuberculosis were notified, of which 3 were cases of Pulmonary Tuberculosis. This is a decrease compared with the figures for 1954. The following table gives the age and sex distribution of these cases.

AGE GROUP	Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female
0 - 5 years	-	-	-	-
5 - 15 years	-	-	-	-
15 - 25 years	1	-	-	-
25 - 35 years	-	-	-	-
35 - 45 years	-	-	-	-
45 - 65 years	1	1	-	1
65 years and over	-	-	-	-
TOTAL	2	1	-	1

One case was admitted to the Sanatorium and one case was discharged relieved. There were two deaths during the year.

I have to report that the happy co-operation between my Department and that of the Chest Physician in Barnsley still exists. The Tuberculosis service in this part of the district is as well organised as it could be, since both the treatment and environmental aspects are closely knit together in the service. The Tuberculosis Health Visitor is the link between the home and the treatment centre and we are extremely fortunate in that our Tuberculosis Health Visitor not only does the environmental follow-up of all cases, but is also in attendance at the consultation at the Chest Clinic, when the patient comes for examination and advice.

During the year the scheme for the vaccination of the 13/14 year old children, with B.C.G., against Tuberculosis, was brought into operation within the Division. You will remember that in my report for 1954 I mentioned that this scheme was in process of preparation and emphasised how important it was that children should have the chance to be protected against a primary attack of Tuberculosis before they enter the adolescent years. Parents were invited to allow their children to become so protected and altogether 51 were tested for their susceptibility and of this number 24 were vaccinated. Successful vaccination cannot be assured until another skin test has been carried out after a period of approximately twelve months.

I would like to say here that I think there could be a better response to the offer of this protective measure for those children and I strongly urge all parents of such children to take advantage of this offer.

#### FOOD POISONING.

There was not a single case of Food Poisoning notified to my Department during the year. This is a most satisfactory state of affairs, and long may it continue.





I must emphasise again what a serious business Food Poisoning can be. The spread is rapid and often the persistent carrier is the means of keeping the disease in the community for a considerable time. It is so essential that if a case of Food Poisoning occurs we in the Department should know without delay, for one or two reasons. One is that we would like to know as soon as possible what is the source of the Food Poisoning; then we would like to know the number of people at risk and probably affected, and we would like to liaise very closely with the Doctor who is treating the case and with the Laboratory concerned. It is important that every case should be found and treated.

It is true that Food Poisoning is a preventable condition and when it is put quite bluntly that Food Poisoning is the result of carelessness on somebody's part, one is encouraged to appeal to all right thinking citizens to do everything possible to make sure that in the handling of food, proper hygienic principles are practised.

#### POLIOMYELITIS

During the year 4 cases of Polioyelitis were notified 3 of which were the Paralytic type. Two of the cases occurred in the third quarter (1 paralytic and 1 non-paralytic) and two paralytic cases were notified during the last quarter.

One boy, between the ages of 5 and 9 years, was found to have a weakness of the muscles of one foot and on being taken to the family Doctor it was discovered that he had obviously, at some time previously, suffered an attack of Poliomyelitis, and this was the slight resultant muscle weakness. Similarly a case of a late adolescent girl who had been referred to General Hospital because of some leg muscle weakness, was later transferred to the Orthopaedic Hospital, Rivelin, where it was discovered that she, too, must at some time in recent weeks have suffered an attack of Poliomyelitis infection. The other two cases were both admitted to Hospital, the paralytic case being referred to the Rivelin Hospital for Orthopaedic treatment and the non-paralytic case being returned home cured.

The attack rate for the district for the paralytic type was 0.41 per 1,000 of the population as against a rate of 0.08 for England and Wales and 0.15 for the Administrative County of the West Riding. The non-paralytic figures were 0.13 for Penistone Rural District, as against 0.06 for England and Wales and 0.05 for the West Riding Administrative County. These figures indicate that the incidence was comparably higher in this district than in the Country generally.

The Summer of 1955, however, was warm and dry with conditions favourable for the appearance of the disease. In view of the relatively high incidence in the surrounding district and the fact that there is much coming and going by the population amongst the districts, I am glad to report that there was this relatively small incidence within the Penistone Rural District. Protection against this disease is eagerly sought and at the present moment we believe that the Medical Research Council together with expert Medical Scientists, are preparing a vaccine, similar to the Salk type as used in America, for use in this Country. It is very probable that early next year, and before high summer, some pilot scheme, at least, of vaccination against Poliomyelitis, should be in operation.

#### HEALTH EDUCATION.

During the year medical staff, Health Visitors and other workers in the field of preventive medicine have taken every opportunity to contact the general public and discuss health matters. These talks have generally taken place in Schools and Clinics, although the Health Visitors towards the end of the year were preparing to conduct group discussions in the Clinic, particularly with young expectant Mothers.





We must seize every opportunity to talk to the public, and it is amazing how interested the public are in health matters. This was brought home very forcibly when the scheme for vaccination against Tuberculosis went into operation, for then parents and Teachers and some of the children themselves were most interested in the whole business of Tuberculosis and its prevention. We had one or two interesting discussions. All the time, of course, there are pamphlets distributed posters exhibited and in short every available means used to deal with this subject of Health Education.

## GENERAL PROVISION OF THE HEALTH SERVICES.

### HOSPITALS

Penistone is served by General Hospitals in Barnsley and in Sheffield. For Infectious Diseases the Kendray Hospital in Barnsley and the Lodge Moor Hospital, Sheffield, are the ones used. Maternity cases are dealt with at the Hallamshire Maternity Home, Chapeltown, the St. Helen's Hospital, Barnsley, and sometimes the Princess Royal Maternity Home, Huddersfield.

### LABORATORY FACILITIES.

All laboratory work is carried out by the two Public Health Service Laboratories, one at Wakefield and one at the City General Hospital, Sheffield.

### MORTUARY.

There is a Mortuary in Penistone, and this serves the surrounding area.

### AMBULANCE SERVICE.

The district is served by Ambulances stationed at the Depot at Hoyland. Towards the end of the year there were discussions with regard to the re-establishment of an Ambulances Sub Depot in Penistone. I understand that there is a possibility of the Sub Depot at Penistone being re-opened again in the not too distant future.

As it is, the vehicles at Hoyland are available, and as I have mentioned in previous reports, six of the seven vehicles are radio controlled and are, in effect, small mobile Ambulance Sub Depots, which are capable of receiving and transmitting messages whenever services are urgently required.

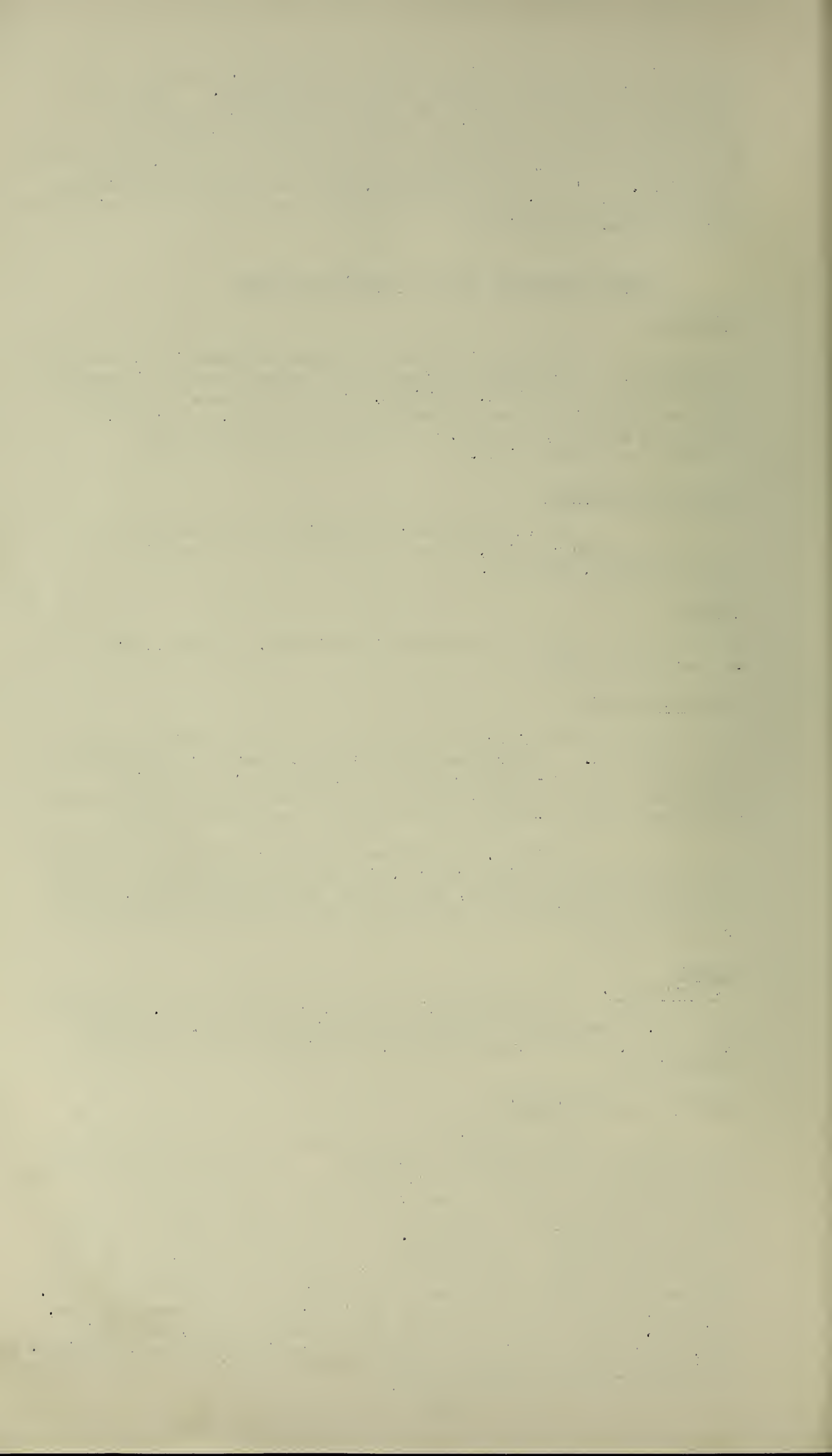
### CLINICS.

#### Tuberculosis.

A subsidiary Clinic is held at Weston House, High Street, Penistone, on the first and third Thursdays in each month. The main Clinic at 46, Church Street, Barnsley, is available for more detailed examinations.

### MATERNITY & CHILD WELFARE

The only Child Welfare Clinic we have in the Penistone Rural District is the one held at Cawthorne. This Clinic is principally a weighing centre although a Medical Officer does attend at regular intervals of approximately one month at the request of the Health Visitor, and carries out vaccinations, immunisations, and also gives advice to mothers about the young babies, if required. At this Clinic during the year 51 children attended. The premises are of use to us, too, for special services such as the occasion when the School Medical Inspection is carried out there rather than disturb the normal routine work in the local School. Of course, we have the very complete Clinic premises at Shrewsbury Road, Penistone, which not only serves the need of Child Welfare, Eye Clinic work, Minor Ailment Clinic and Occupational Training for Mental Defectives, but it also contains a completely equipped Dental Clinic with Dental Officer and Receptionist permanently on duty.





## Ante-Natal Clinic

I should like to mention here that there is established at the Shrewsbury Road Clinic in Penistone a regular Ante-Natal Clinic held on Tuesday afternoons, at which one of the local General Practitioners is in attendance. The Midwives are encouraged to have their cases attend at this Clinic to be seen by the Doctor and to obtain any help and advice which may be necessary. Miss Bain, of Silkstone as one of the Midwives attends at this Clinic and patients from the Rural District who wish to attend may do so.

## HEALTH VISITING

There are two Health Visitors employed to cover the combined areas of Penistone Rural and Penistone Urban District, as follows:-

<u>NAME</u>	<u>ADDRESS</u>	<u>TEL. NUMBER</u>
Miss A. Haigh	Goldthorpe Cottage , Millhouse, Penistone	Penistone 3384
Mrs. B. Mawson	c/o Mrs R. Taylor The Bungalow, Oxpring	Penistone 2385

This does not take into account the Tuberculosis Health Visitor, whose work is exclusively that of Tuberculosis and not general Health Visiting. Those two Health Visitors cover the combined U.D. and R.D. districts and thus there is some overlap from one district to another. Miss Haigh is principally concerned with the Urban District and Mrs. Mawson the Rural District. Both these Health Visitors are mobile and they cover a tremendous amount of ground to provide a most efficient Health Visiting Service. They both attend at the Shrewsbury Road Clinic, Penistone, on a Monday and Mrs. Mawson is responsible for the organisation of her Clinic at Cawthorne on Wednesdays. Both Nurses attend the Ante-Natal Clinic on a Tuesday if cases from their particular areas are being seen by the Doctor in charge of that Clinic.

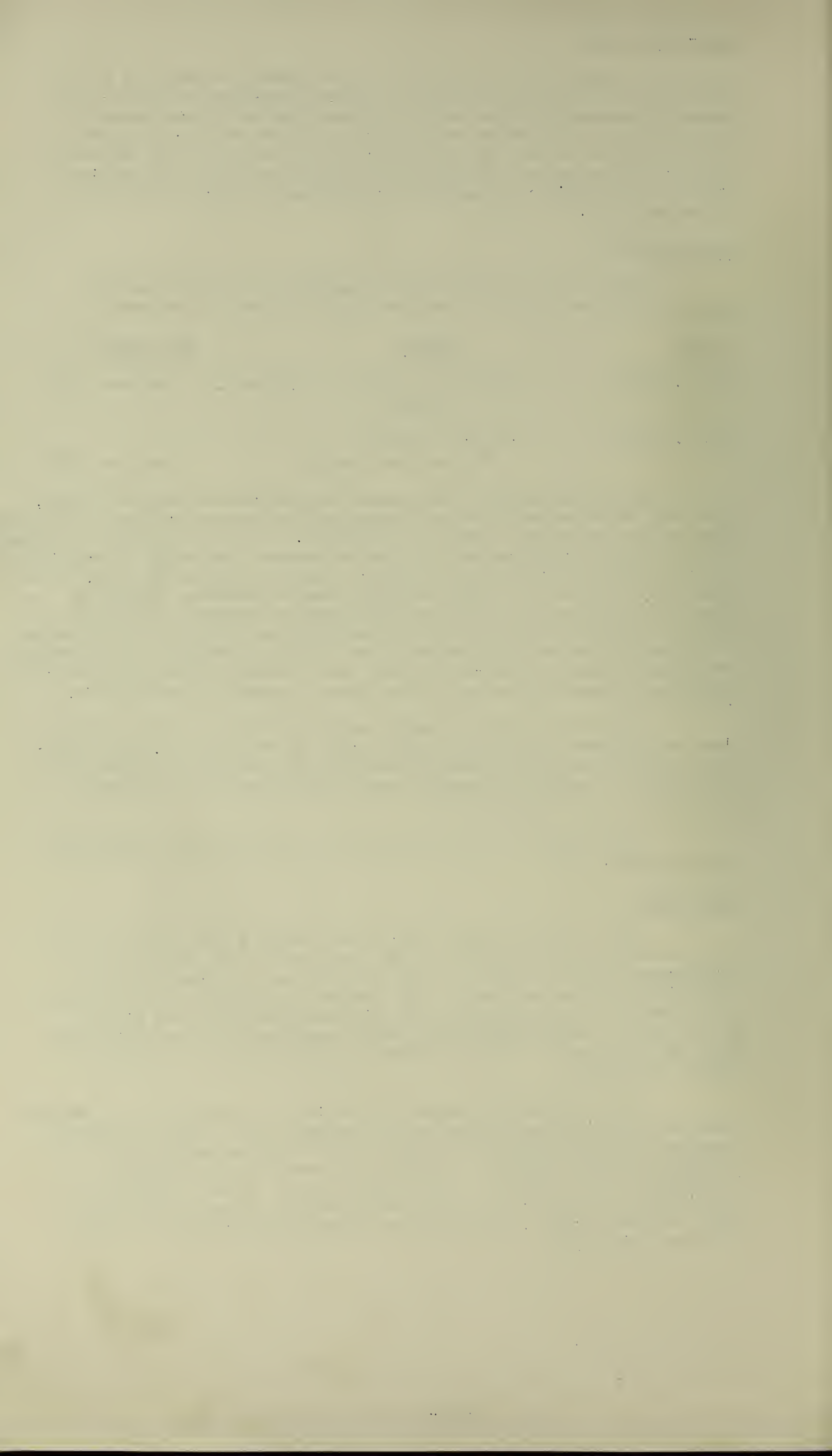
More and more it is becoming recognised that the Health Visitor plays an important part in the health service in the district. One of her main objects is to work in close liaison with the General Practitioner and to get into the homes and encourage group discussions with the people, in their homes, on health matters.

The number of visits made by these Health Visitors during the year was 4,749.

## HOME NURSING

Mrs. Guckion at Crane Moor is the resident Home Nurse for most of the Penistone Rural District. The other part of the district is incorporated with the Penistone Urban District and is served by two Home Nurse/Midwives from Penistone. The district is satisfactorily covered so far as Home Nursing is concerned and all those Home Nurses are highly trained ladies, fully equipped and mobile, and capable of performing high class nursing services, similar to what one would expect a patient to receive in Hospital.

More and more the General Practitioner is beginning to appreciate just how much help these Nurses can be, for much of the modern domiciliary treatment is dependent on a high standard of efficiency amongst the available nursing personnel. In fact, the demand for Home Nursing Service is getting such that there is every possibility of an early increment in establishment of Home Nurses, on a County basis at least. During the year, the Home Nurses in this district attended 305 patients, the number of visits being 8,093.





I must point out that it is impossible for me to divide these figures into cases exclusively for Ponistono Rural District and Ponistono Urban Districts. I have pointed out that the areas covered by each respective Nurse overlaps occasionally from the Urban to the Rural District, thus the only satisfactory figure I can give is the total number of cases attended in the combined districts.

The Nurses employed in the Home Nursing Service in your area are as follows:-

<u>NAME.</u>	<u>ADDRESS.</u>	<u>TEL. NUMBER.</u>
Mrs. C. Guckien.	12, Cliffo Ave., Crano Meer, Thurgoland.	Stocksbridge, 2159
Miss A.M. Ruane ) Miss S.M. Hemphill )	34, Victoria Street, Penistone.	Penistone, 167

#### MIDWIFERY SERVICE.

One Midwife resident in Silkstone and the two District Nurse/Midwives in Ponistone are responsible for the Midwifery Service in the district. Again I must mention the overlap between the Urban and Rural Districts and would emphasise that it is rather difficult to give the exact picture so far as services in each of the respective districts is concerned. The statistics I have given, therefore, are these for the combined districts.

Each of these Midwives is well qualified, very efficient, mobile, qualified to administer Gas and Air Analgesia, and each is in possession of the appropriate apparatus.

During the year the Midwives attended 93 confinements in the Ponistone Rural District, 85 as Midwives and 8 as Maternity Nurses. Of the 93 Patients confined, 37 availed themselves to Gas and Air Analgesia.

Below are details of the Nurses in the Midwifery Service in your area:-

<u>NAME.</u>	<u>ADDRESS.</u>	<u>TEL. NUMBER</u>
Miss J.L. Bain.	"Plovna", Silkstone Common, Nr. Barnsley.	Silkstone 356.
Miss A.M. Ruane ) Miss S.M. Hemphill )	34, Victoria Street, Penistone.	Penistone 167.

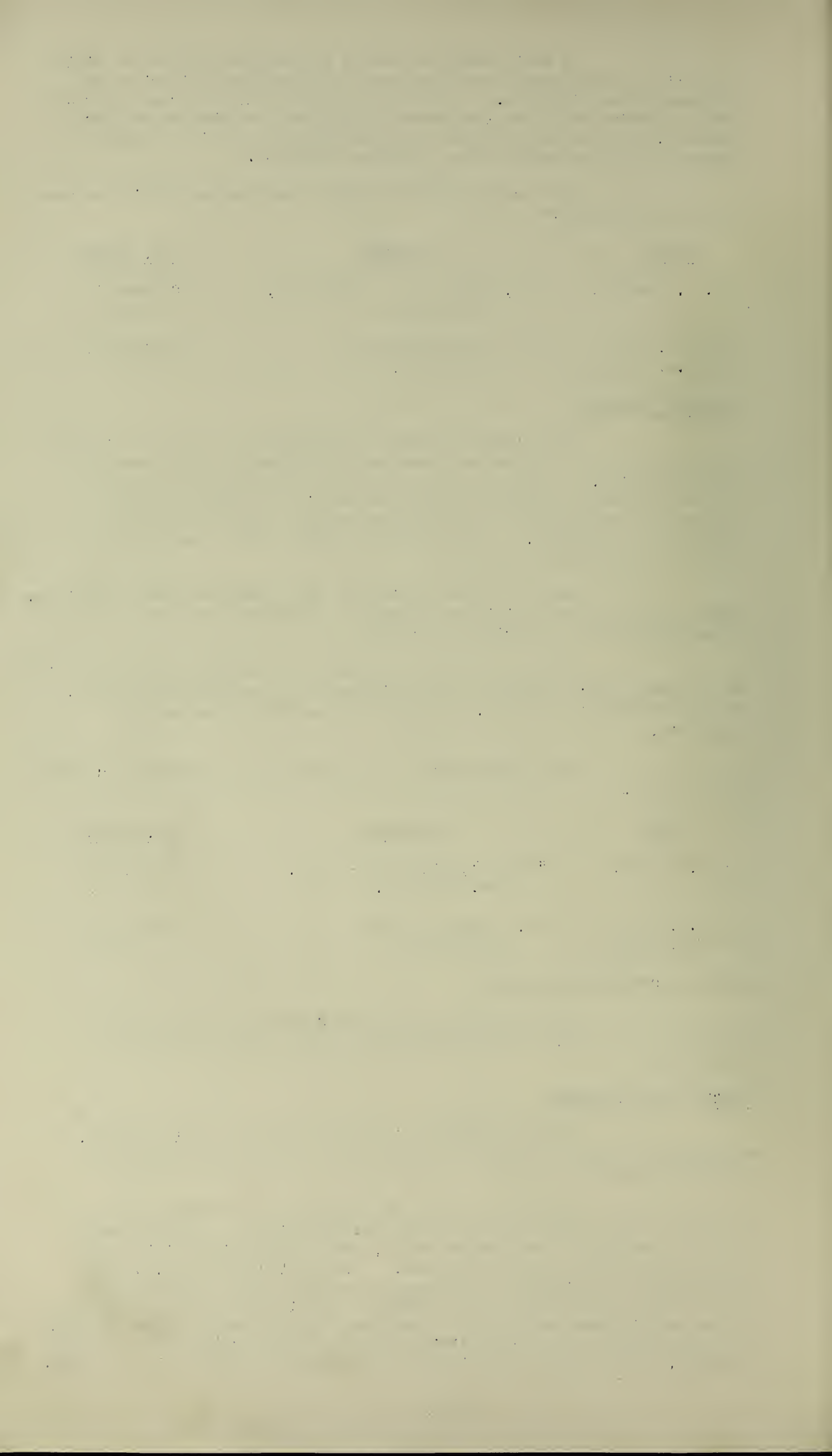
#### NATIONAL ASSISTANCE ACT, 1948.

No action was taken under Section 47 of the National Assistance Act, 1948, or the Amendment Act, 1951, during the period under review.

#### DOMESTIC HELP SERVICE.

There is still an increasing demand on this service, and we are fortunate in having a willing band of Helpers to provide and meet this demand.

Applications for the services of a Domestic Help are made either direct to me or to the Health Visitor. In every case, with the exception of confinement cases, the Health Visitor visits the home to assess the merits of the case. The application form, together with a Medical Certificate supporting the patient's claim for assistance is sent to the Divisional Welfare Officer via this Office for assessment. In the meantime the Domestic Help commences duty and stays at the household until such time as the Health Visitor considers her services are no longer required, or alternatively until the patient asks for the service to cease.



In one or two instances Domestic Helps have been employed at Tuberculous households. Here the Domestic Help volunteers for this particular type of case and receives additional pay. Before undertaking such duties they are medically examined by the Consultant Chest Physician at the Chest Clinic and at periodic intervals thereafter. It is a tribute to these ladies that there is no lack of volunteers for these cases.

During 1955, a total of 3,623 Domestic Help hours were provided in the Penistone Rural District. In all 9 Domestic Helps were employed, attending the homes of 17 cases. Of this total 10 were continuing cases from 1954, the remainder being new ones.

The types of cases where the Domestic Help Service was made available are classified as follows:-

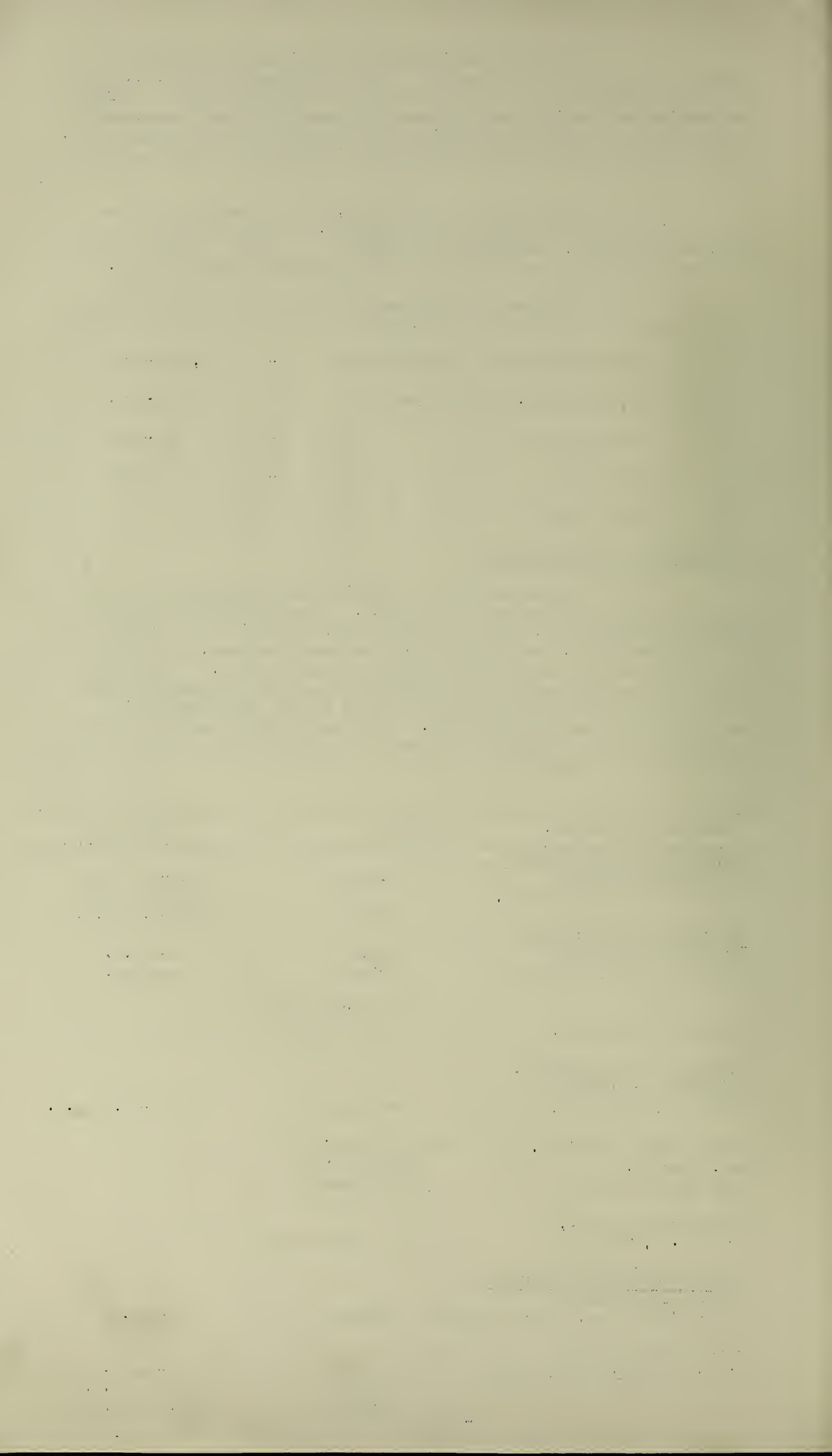
General Cases, 65 years, and over	-	3,217 $\frac{1}{2}$ -hrs.
General Cases, under 65 years	-	222 $\frac{1}{2}$ -hrs.
Tuberculosis,	-	95 -hrs.
Maternity	-	88 -hrs.
Other cases	-	-

#### DISTRIBUTION OF WELFARE FOODS.

The scheme for the distribution of Welfare Foods has now been functioning for well over a year. The difficulties arising during the transitional stage have been resolved and it is a tribute to the staff concerned, and especially the voluntary workers, that at no time has there been any complaint regarding this service. The general public are now well aware of the days and times when the Welfare Foods can be obtained, and I append below a table showing the Distribution Centres covering the whole Division. You are no doubt aware that these commodities can be obtained at any Centre, and not necessarily the ones established in the district.

Address of Premises.	Days	Times.
<u>STOCKSBRIDGE URBAN DISTRICT.</u>		
Child Welfare Centre,	Tuesday	10-12 a.m.
British Hall, Stocksbridge,		1.30-3.30 p.m.
	Friday	1.30-3.30 p.m.
<u>PENISTONE URBAN DISTRICT.</u>		
Child Welfare Centre	Monday	2-4 p.m.
Shrowsbury Road, Penistone	Friday	2-4 p.m.
Mr. A. Dyson,	During Shop hours.	
Town End, Thurlstone.		
<u>PENISTONE RURAL DISTRICT.</u>		
Child Welfare Centre,	Wednesday	1.30 - 3.30 p.m.
Golf Club, Cawthorne,		
Private House and Shop,	On application at	
Mrs. Laycock,	House or Shop	
Crag Lyn, Thurgoland.	(except Sundays)	
Stocksbridge Co-op.,	During Shop hours.	
Crane Moor, Sheffield.		
<u>HOYLAND NETHER URBAN DISTRICT</u>		
Child Welfare Centre	Thursday	2-4 p.m.
Church Schoolroom, Hoyland Common.		
Child Welfare Centre,	Tuesday	11 - 12 a.m.
Minors' Welfare Hall, Hoyland.		2 - 4 p.m.
	Friday	11.- 12 a.m.





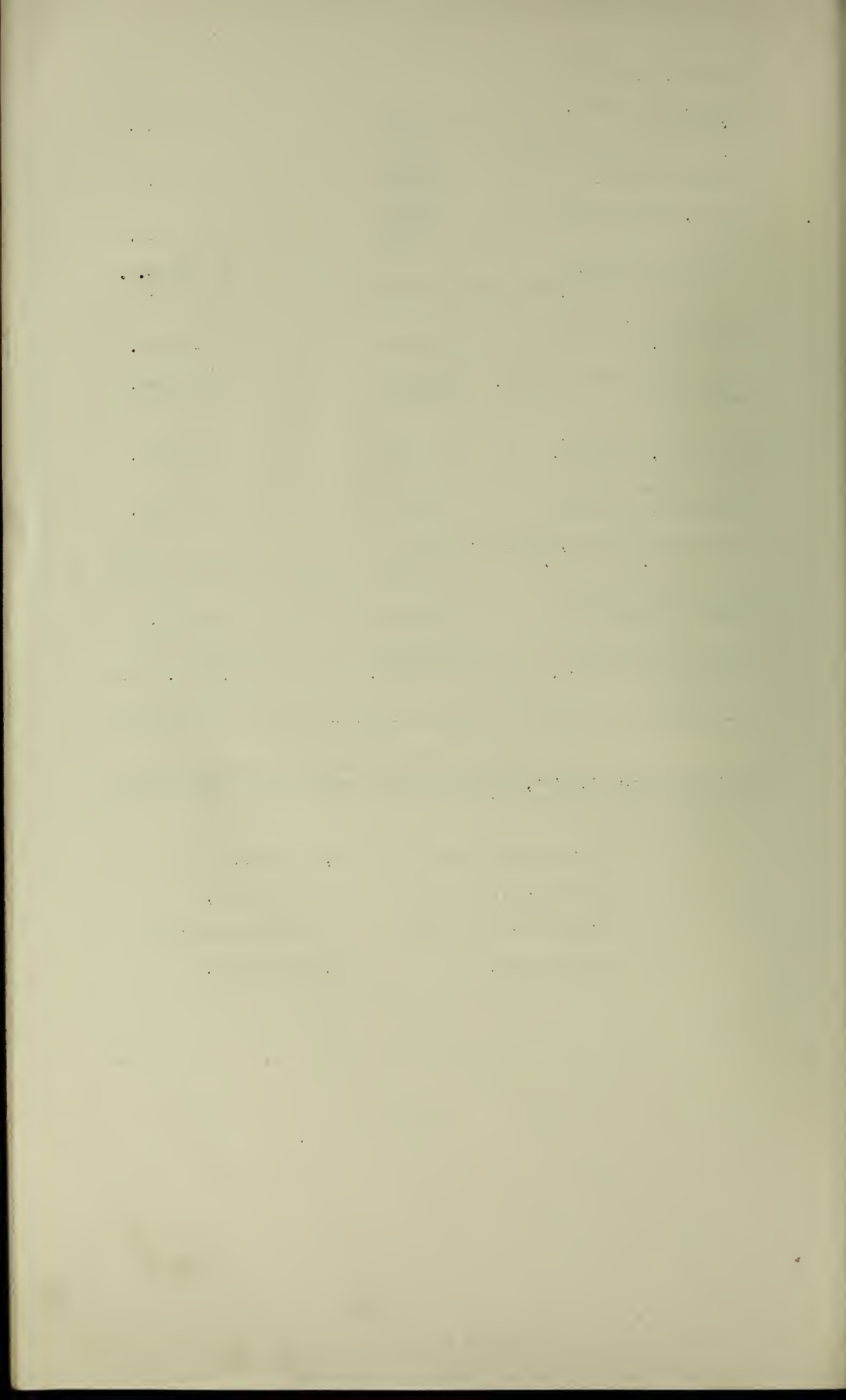
WORTLEY RURAL DISTRICT.

Clinic, Parish Hall, Oughtibridge	Thursday	2 - 4 p.m.
Clinic, Brightholme Chapel Wharnccliffe Side.	Alternate Tuesdays	2 - 4 p.m.
Clinic, Memorial Hall, Worrall	Alternate Tuesdays	2 - 4 p.m.
Child Welfare Centre, Miners' Welfare Hall, Chapeltown	Wednesdays	11 - 12 a.m. 2 - 4 p.m.
Clinic Methodist Chapel High Green.	Tuesday	2 - 4 p.m.
Clinic, Gatty Memorial Hall, Ecclesfield.	Monday Thursday	2 - 4 p.m. 2 - 4 p.m.
Child Welfare Centre, Scout Hall, Grenoside.	Thursday	2 - 4 p.m.
Child Welfare Centre, Scout Hall, Tankersley.	Alternative Monday	2 - 4 p.m.
Child Welfare Centre, St. Paul's Wheaton Road, Sheffield.5	Inst. Tuesday	1.30- 3.30 p.m.
Child Welfare Centre, Knowle Top, Stannington.	Wednesday	2 - 4 p.m.
Child Welfare Centre, Congregational Church, Loxley	Alternate Tuesdays.	1.30- 3.30 p.m.

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As a matter of interest there was issued in the Penistone Rural District, during the twelve months ended 31st December, 1955, the following commodities

National Dried Milk	-	1,109	tins,
Cod liver oil	-	264	bottles,
Vitamin A and D tablets	-	80	(Packets of 45)
Orange Juice,	-	1,992	bottles,





WATER SUPPLIES.

Houses and                      2404 houses are situated in the area, 2157 of which  
Water Supplies.           have a supply from public mains.      247 houses are  
   supplied from private sources of supply

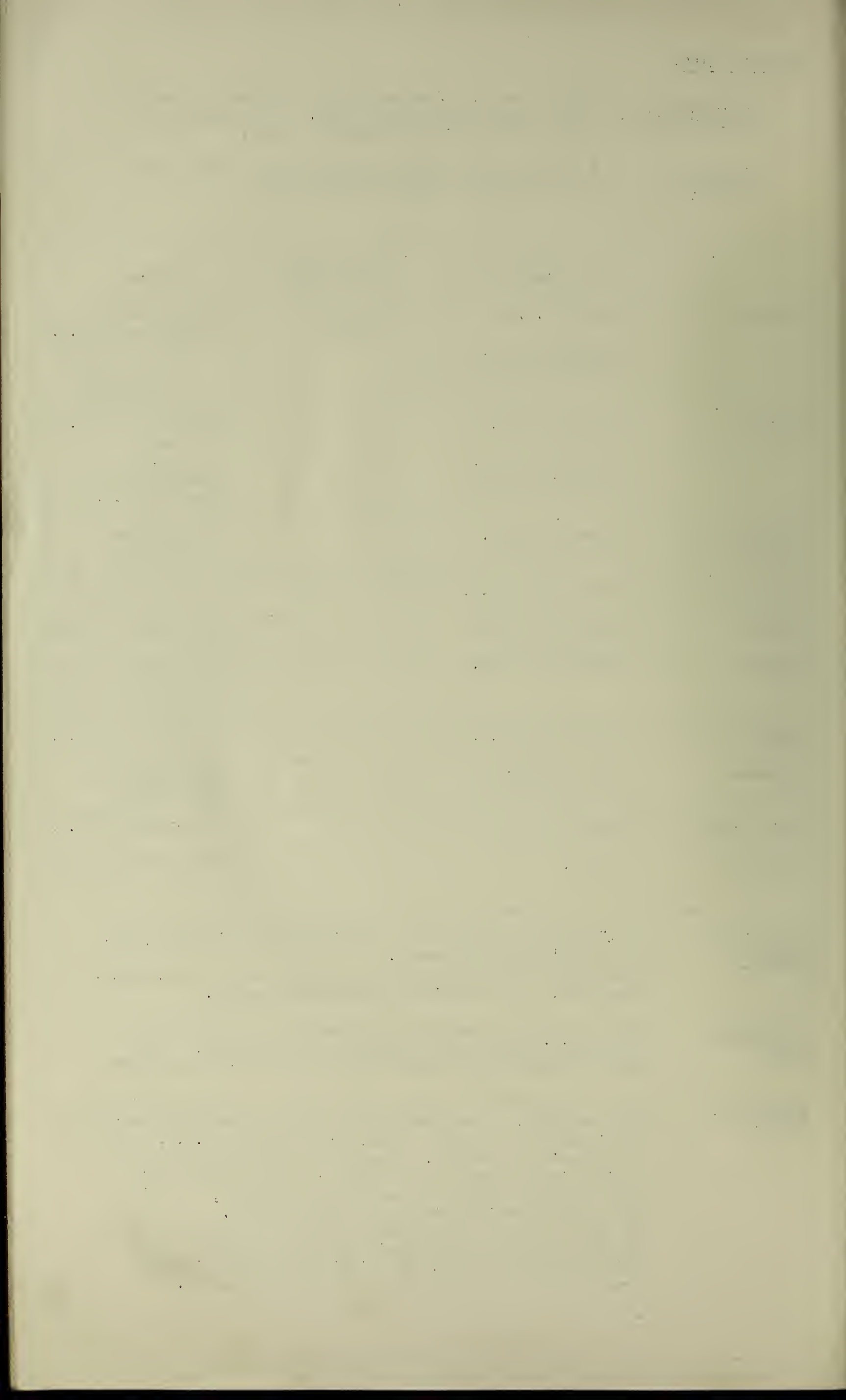
Sources of                      Supplies to the several Parishes obtain water from  
Supply.                        the undertaking named in the Schedule

P a r i s h	Name of Supplying Authority	Name of Private Undertaking	Remarks
Cawthorne	Darton U.D.C.  Barnsley Corpn. Donby Dale U.D.C.	Cannon Hall Estate	In part and distributed by R.D.C Do            do Do by Cannon Hall Estate
Dunford	Penistone R.D.C. do Penistone U.D.C. Holmfirth U.D.C.		Distributed by R.D.C do. do. Distributed by Holmfirth U.D.C.
Gunthwaite & Ingbirchworth	Barnsley Corpn.		Distributed by R.D.C.
High Hoyland	Denby Dale U.D.C.		Distributed by R.D.C
Hunshelf	Sheffield Corpn.		Distributed by R.D.C
Langsett	Sheffield Corpn.		Distributed by the Corporation where piped supplies obtai.
Oxspring	Penistone U.D.C.		Distributed by R.D.C
Silkstone	Barnsley Corpn.		Distributed by Corporation
Stainborough	Barnsley Corpn.		Distributed by R.D.C
Thurgoland	R.D.C.		Distributed by R.D.C

Extension of                      The 3" main was extended at Roughbirchworth during the year,  
Supplies                        also the 3" main at Crowedge.  
A new hydram and electric pump was installed at the Old Mill,  
Thurgoland, for the parish of Thurgoland supply.

Quality of                        Routine samples of water have proved that the supplies in  
water                               the Council's area have maintained a good quality. The  
water is tested at the Public Health Laboratory at Wakefield.

Quantity of                        The abnormal drought of 1955 played havoc with the quantity of  
Water.                               water supplied. The springs supplying the Parish of Thurgoland  
practically ran dry and a supply from Penistone U.D.C. saved  
a very serious situation. Mains were completely cut off  
at night in an effort to save water and whilst the public  
were completely unaware of the serious position, a constant  
supply was maintained with very few complaints.  
The water supply to the Wentworth Castle Training College and  
the Coal Mine situated at Stainborough has caused much  
anxiety during the year, the existing main which is badly  
corroded must be renewed at the earliest opportunity.



Proposed Extensions. The complete renewal of mains in the Parish of Stainborough.  
The permanent scheme for the Villages of Carlecotes and Crowedge.  
The extensions to the mains in the Parish of Cawthorne.  
The construction of a new storage reservoir at Thurgoland and the renewal of certain mains within the Parish.

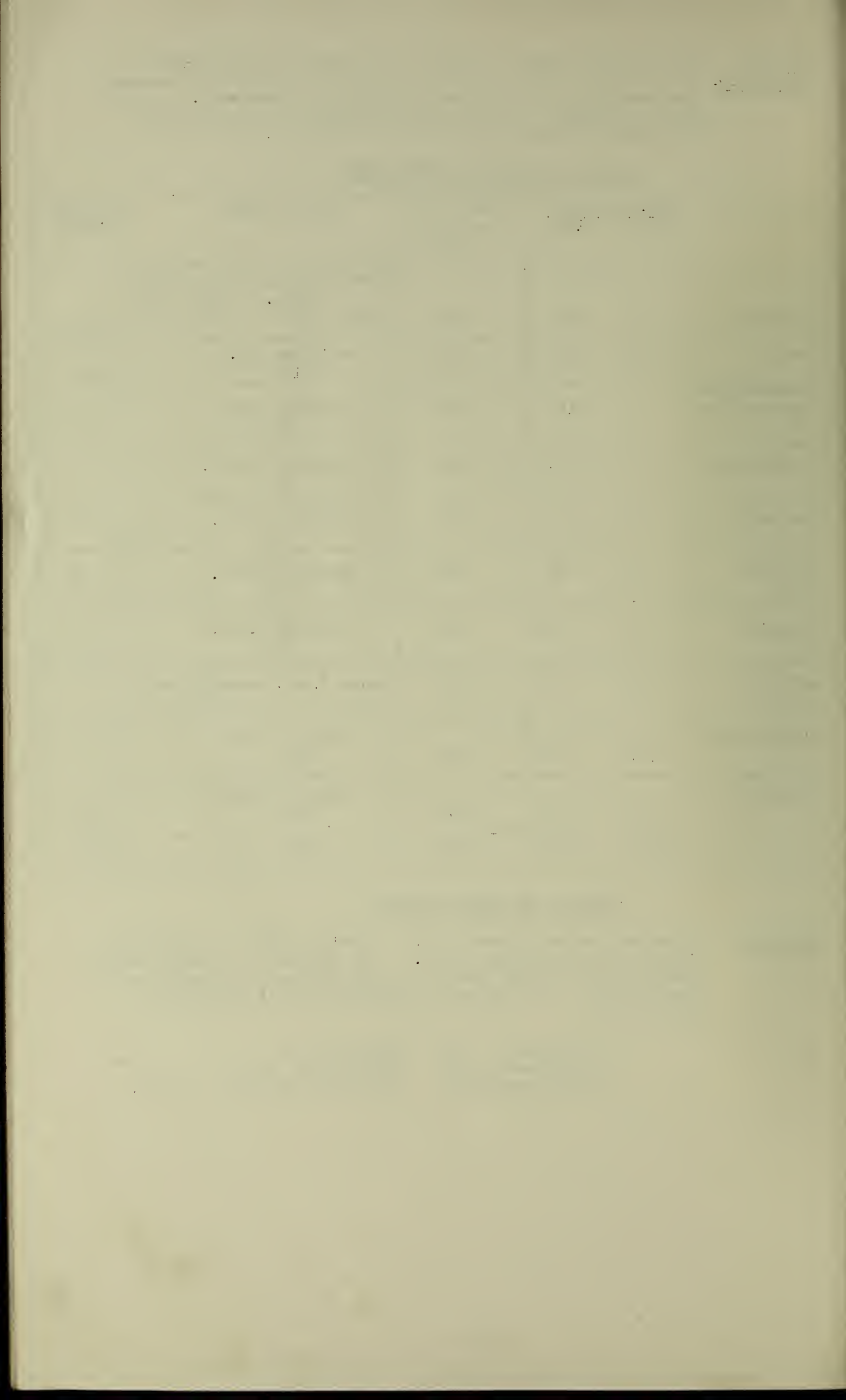
TABLE OF CONSUMERS AND SUPPLIERS

P a r i s h	No. of Houses		Estimated Population 1955	Public Supply	Private Supply
	1955	1954			
Cawthorne	333	340	975	Darton Barnsley Cannon Denby Corpn. Hall Dale 22 245 34 6	26
Dunford	280	264	863	Penistone R.D.C. 183	97
Gunthwaite & Ingbirchworth	110	110	358	Barnsley Corpn. 96	14
High Hoyland	53	52	182	Denby Dale U.D.C. 50	3
Hunshelf	94	94	300	Sheffield Corpn. 65	29
Langsett	76	76	240	Sheffield Corpn. 32	44
Oxspring	249	249	735	Penistone U.D.C. 236	13
Silkstone	543	542	1650	Darton U.D.C. Barnsley Corpn. 4 538	1
Stainborough	132	157	400	Barnsley Corpn. 130	2
Thurgoland	534	507	1627	Penistone R.D.C. 516	18
	2404	2392	7330	2157	247

SEWERAGE AND SEWAGE DISPOSAL

Sewerage Of the 2404 houses situated in the district, 1709 are connected to either public or private sewers. The disposal of sewerage to the remaining houses is by means of private cesspools and septic tank installation. The following properties are not connected to public sewers:-

Carlecotes	23	Crowedge	43
Ingbirchworth	15	High Hoyland	21
Roughbirchworth	15	Thurgoland (Old Mill Lane)	15.





Improvements

During the year work commenced on the new works at Ingbirchworth and Crane Moor; also at Hood Green which the Council constructed by direct labour. Prison Labour from Wakefield Jail was employed at the Ingbirchworth and Crane Moor schemes.

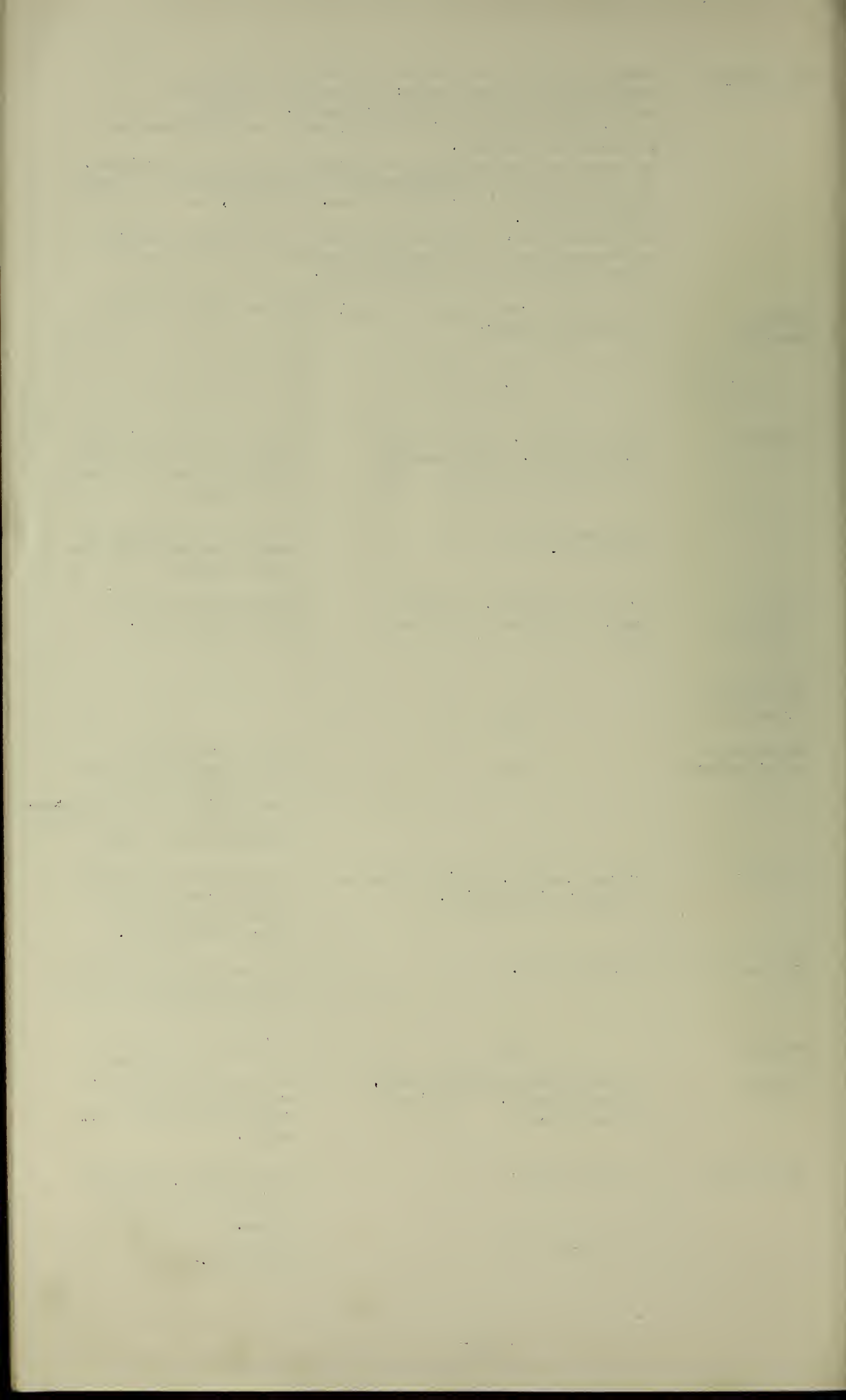
The sewerage plant situated at Thurgoland requires modernizing. The application to the Ministry for the installation of a sewage ejector plant at the Clay Hall Works, Cawthorne, was rejected during the year.

The Council are to consider the formation of a mobile sewerage maintenance team to systematically maintain all the sewerage plants situated in the Council's area.

Sewage Disposal

The existing arrangements for dealing with the sewage disposal is scheduled below:-

P a r i s h	P l a n t	R e m a r k s
Cawthorne	Screen chamber, detritus tank, settling tank, dosing chamber, 2 distributors and humus tank,	This plant deals with the sewage from the West side of Village and is situated at Dark Lane.
	Settling tank with land irrigation.	This plant deals with the sewage from the East side of the village
Dunford (Dunford Bridge)	Screening chamber, detritus tank, 2 distributors and humus tank.	Situated East of the Railway Goods Yard.
(Townhead, Hazlehead & Crowedge)	None	
Gunthwaite & Ingbirchworth	None	The built-up area of Ingbirchworth village has an irrigation area and situated South of the village. Construction of the new scheme commenced during 1955.
Hunshelf	Screen chamber, detritus tank and tippler distribution.	Dealing with the built-up area of Green Moor and situated North of the centre of Well Hill.
High Hoyland	Settling tank.	Only new houses dealt with in the village and situated in Marjory Wood.
Langsett	None	Individual arrangements.
Oxspring	Detritus tank, settling tank, dosing chamber, 1 distributor Humus tank.	Dealing with the built-up area in the Parish and situated near Bower Hill Bridge.
Stainborough	2 ash filters.	Dealing with Hood Green village and situated at the rear of the Airey Houses.
	1 settling tank.	Dealing with 20 houses at Ratten Row.





P a r i s h	P l a n t	R e m a r k s
Silkstone	Detritus tank, screen chamber, contact settling tanks.	Dealing with Silkstone village and situated on the Wagon Road, North of the village.
	Screen chamber, detritus tank, 2 distributors and humus tank.	Dealing with the Silkstone Common area and situated North of Throstle Nest Farm,Moorend.
Thurgoland	Settling tank, 2 filter beds.	Dealing with the Thurgoland village and situated at Spring Wood.
	Settling tank,	Dealing with the built-up area at Crane Moor Nook.
	Settling tank.	Dealing with the built-up area at Crane Moor and situated North of Dance Lane, CraneMoor.
	Settling Tank-ash filter	Dealing with property in the area near Brick Row, Silkstone Common

CONVERSION OF PRIVIES.

The following tables show the number of conversions made during the year, all of which received financial assistance from the Council:-

<u>Parish</u>	<u>Number</u>
Dunford	1
Silkstone	3
Stainborough	2
Thurgoland	6
	<u>12</u>
	<u>      </u>

WATER CLOSETS.

Number of water closets installed in new houses built during the year:-

<u>Parish</u>	<u>By Private Enterprise</u>	<u>By Council</u>
Dunford	16	
High Hoyland	2	
Oxspring	1	
Silkstone	2	
Stainborough		4
Thurgoland		28

SUMMARY OF THE NUMBER OF WATER CLOSETS.  
PRIVIES AND PAN CLOSETS.

<u>Parish</u>	<u>No. of houses</u>	<u>No. of houses with W.c.'s</u>	<u>No. of houses. with privies</u>	<u>No. of houses. with sanitary pans</u>
Cawthorne	333	261	61	11
Dunford	280	156	99	25
Gunthwaite & Ingbirchworth	110	65	42	3
High Hoyland	53	38	14	1
Hunshelf	94	38	53	3
Langsett	76	11	29	36



<u>Parish</u>	<u>No. of houses</u>	<u>No. of houses with w.c.'s</u>	<u>No. of houses with privies</u>	<u>No of houses with sanitary pans</u>
Oxspring	249	211	35	3
Silkstone	543	495	42	6
Stainborough	132	74	58	-
Thurgoland	<u>534</u>	<u>360</u>	<u>173</u>	<u>1</u>
	<u>2,404</u>	<u>1,709</u>	<u>606</u>	<u>89</u>

#### REFUSE COLLECTION AND DISPOSAL

The whole of the district is publicly scavenged. Two refuse collection vehicles are employed. There has been no alteration of personnel during the year as this type of labour is very difficult to recruit. This service is not one of which the Council is particularly proud and the position appears insoluble owing to the difficulties of recruitment. All men are supplied with overalls, wellington boots, gloves, goggles and rainproof outfits. Two refuse vehicles are fully employed on this service.

<u>Make</u>	<u>Capacity</u>	<u>Year of Manufacture</u>
Austin Eagle	7 cu. yards	1955
Karrier C.K.3.	10. cu.yards	1948

Two drivers and five loaders are employed on these vehicles.

#### Frequency of Collection.

Bins in the most populated areas are emptied every 7 - 10 days.  
Bins in the sparsely populated areas are emptied fortnightly.  
Privies and pan closets in all parts of the district every 4 - 5 weeks or more frequently upon complaint.

#### Refuse tips.

There are eight refuse tips situated in the area, the refuse is entirely disposed of by uncontrolled tipping.

#### PUBLIC HEALTH ACTS.

##### Sanitary Inspections - Nuisances.

Total number of inspections made in 1955 for nuisances - 33  
" " " " " " " " other purposes - 250

Nuisances found in 1955 - 23  
" abated " 1955 - 29

No statutory action was required during the year





## HOUSING - LOCAL AUTHORITY AND PRIVATE ENTERPRISE.

Summary of the number of dwelling houses situated in the district in 1955

P a r i s h	No. of houses 1954	New houses built 1955 L.A.Private		Total	Closed or Demolished in 1955	Total No. of houses in 1955	Total No. of Council houses 1955	Estimate popul- ation
Cawthorne	333	-	-	333	-	333	57	975
Dunford	264	-	16	280	-	280	28	863
Gunthwaite & Ingbirchworth	110	-	-	110	-	110	20	358
High Hoyland	52	-	1	53	-	53	10	182
Hunshelf	94	-	-	94	-	94	6	300
Langsett	76	-	-	76	-	76	-	240
Oxspring	249	-	1	250	1	249	68	735
Silkstone	542	-	2	544	1	543	182	1650
Stainborough	157	4	-	161	29	132	26	400
Thurgoland	507	28	-	535	1	534	122	1627
	2,384	32	20	2,436	32	2,404	519	7,330

There are 39 back to back houses existing in the area:-

<u>Parish</u>	<u>No. of houses</u>
Thurgoland	11
Crane Moor	14
Crowedge	14
	<u>39</u>

### HOUSING REPAIRS AND RENTS ACT, 1954 IMPROVEMENT GRANTS.

During the year 10 applications were received for improvement grants. All the applications were approved and a total of £3,163. 3. 3d. was granted during the year to these applicants. Every encouragement is given to applicants who wish to improve their property under the above Act and a maximum grant of 50% of the cost of the improvements was given in each case.

### HOUSING ACT, 1936.

4 houses of substandard character were closed during the year. The occupants of these houses were rehoused in new Council houses. In addition to these houses the total number of occupants of the 28 Hostels situated at Stainborough were rehoused at Thurgoland, and the Stainborough Folds Hostels are now uninhabited.

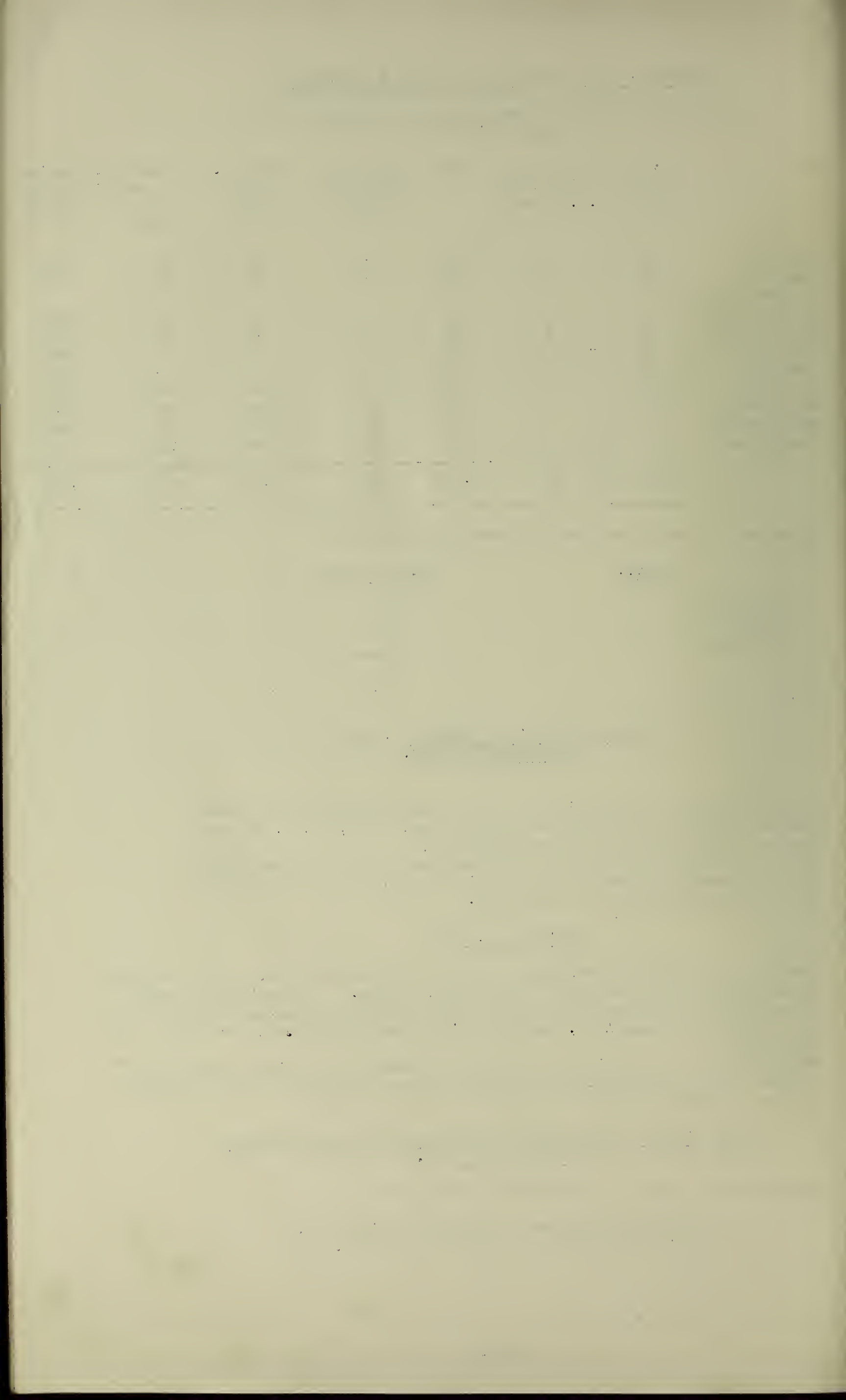
During the year a preliminary survey of substandard properties revealed that a total number of 174 dwellings were substandard and that the Council decided to deal with these properties during the next five years.

### MILK (SPECIAL DESIGNATION) PASTEURISED AND STERILISED MILK REGULATION, 1949.

Licences were granted to the following retailers:-

The Barnsley British Co-operative Society Ltd.  
The Stocksbridge Co-operative Society Ltd.





### ICE CREAM.

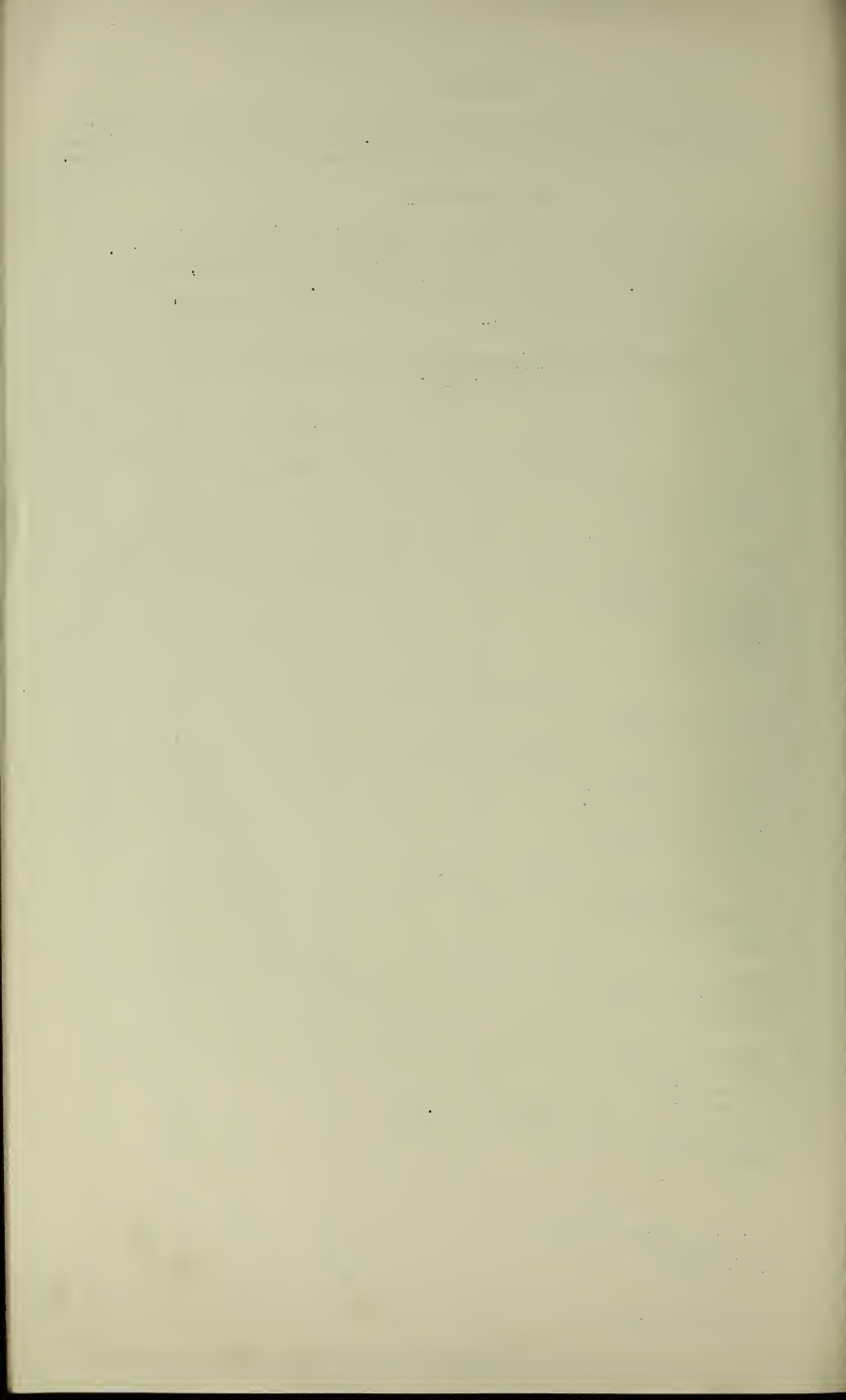
There are 11 retailers of pre-wrapped ice cream situated within the area. 1 application was received during the year. All premises are periodically inspected. There are no ice cream manufacturers situated within the area.

### MEAT INSPECTION.

Four private slaughterhouses were licensed for a period of four years on July 1st 1954. Three of these slaughterhouses are used regularly. A 100% inspection of meat has been maintained during the year, often with inconvenience, especially during holiday periods. A summary of the inspection details according to the Ministry's recommendations is as follows:-

#### Carcases and Offal inspected and condemned in whole or in part, 1955.

	Cattle Excluding Cows	Cows	Calves	Sheep & Lambs	Pigs	Horses
Number killed (if known)						
Number inspected	50	587	3	38	20	-
<u>All diseases except Tuberculosis &amp; Cysticerci</u> Whole carcasses condemned		1				
Carcasses of which some part or organ was condemned	4	67		2		
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	8%	11.5%				
<u>Tuberculosis only</u> Whole carcasses condemned		2				
Carcasses of which some part or organ was condemned	10	153				
Percentage of the number inspected affected with tuberculosis	20%	26.3%				
<u>Cysticercosis</u> Carcasses of which some part or organ was condemned						
Carcasses submitted to treatment by refrigeration			NIL			
Generalised and totally condemned						



Cause of Condemnation and weight of meat condemned.

<u>Disease</u>	Cows	Others	Sheep	Pigs.
Tuberculosis	4573	399	-	40
Cirrhosis	968	68	-	-
Fevered, Bruised and Injuries	462	-	-	-
Parasitic	-	-	4	-
	6003 lbs.	467 lbs.	4 lbs.	40 lbs.

Food condemned in premises other than slaughterhouses:-

Tinned Ham	44 lbs.	13-ozs.
Skimmed Milk	90 lbs.	
Pork	260 lbs.	

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

All the Council's tips and properties are periodically inspected and treated. Sewers and Sewerage Works have been treated and no major infestations were discovered. An invitation was offered to and accepted by the Divisional Rodent Officer to inspect all the Council's properties, the report of his inspection was very satisfactory.

School Canteens owned by the County Council have been treated on their behalf during the year. No full time rodent operator is employed by the Council but two employees have received instructions from the Ministry.

FACTORIES AND WORKSHOPS.

There are 21 Factories registered in the area, 17 inspections being made during the year.

Three inspections under Section 37 of the 1937 Act were made and certificates issued in each case.

34 shops are registered in the area under the Shops Act 1912-1938.

Inspections are periodically made and conditions are generally satisfactory.

MOVEABLE DWELLINGS.

Six Caravans situated within the boundary of a new construction Company at Oxspring have been stationed during the year.

The number of resident moveable dwellings situated in the area is 3.





## BYELAWS AND TOWN AND COUNTRY PLANNING APPLICATIONS

During the year the following applications were received and approved:- .

	<u>Building Byelaws.</u>	<u>Planning</u>
Houses	7	12
Bungalows	3	4
Garages	31	11
Additions to houses	10	7
Applications from Y.E.B. for overhead cables	--	29
Caravans	--	1
Miscellaneous	11	32

### COUNCIL PROPERTY.

The Council are now the owners of Council houses, pre and post war. During the year a mobile maintenance or repair team was formed which has proved quite successful. The minor repairs of our property during the year have been carried out without delay and brought up to date. The Council carried out a major scheme of renewing the cooking ranges in 78 pre-war Council houses and the satisfaction to the tenants of this scheme when completed should not pass without record. The installation of the new grates was completed in one programme in a satisfactory manner.





